Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main

	DOGUIII C III FAU C
Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of Illinois	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

B 101

Part 1: Identify Yourself

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name				
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Veronica First name L. Middle name Holloway Last name Suffix (Sr., Jr., II, III)	First name Middle name Last name Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years	Veronica First name Lyn Middle name	First name Middle name		
	Include your married or maiden names.	Holloway	Middle name		
		Last name	Last name		
		First name	First name		
		Middle name	Middle name		
		Last name	Last name		
3.	Only the last 4 digits of your Social Security number or federal	xxx - xx - <u>2</u> <u>0</u> <u>8</u> <u>3</u> or	xxx - xx		
	Individual Taxpaver				

(ITIN)

Identification number

9 xx - xx -_____

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 2 of 64

Veronica L. Holloway
First Name Middle Name Debtor 1

Last Name

Case number (if known)_

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	Home for Tots Business name Business name uses social security number EIN EIN	Business name Business name EIN EIN
5.	Where you live	4600 Flossmoor Road Number Street	If Debtor 2 lives at a different address: Number Street
		Country Club Hills IL 60478 City State ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	City State ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street P.O. Box City State ZIP Code	Number Street P.O. Box City State ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ✓ I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 3 of 64

Veronica L. Holloway
First Name Middle Name Last Name Debtor 1

Case number (if known)_

Pa	Tell the Court Abo	ut Your B	ankrup	ptcy Case				
7.	The chapter of the Bankruptcy Code you are choosing to file under		ruptcy (Foter 7 oter 11 oter 12	ter 11 ter 12				
8.	How you will pay the fee	loca your subr with I nee App I rec By la less pay	pay the entire fee when I file my petition. Please check with the clerk's office in your court for more details about how you may pay. Typically, if you are paying the fee self, you may pay with cash, cashier's check, or money order. If your attorney is nitting your payment on your behalf, your attorney may pay with a credit card or check a pre-printed address. Let to pay the fee in installments. If you choose this option, sign and attach the ication for Individuals to Pay The Filing Fee in Installments (Official Form 103A). Let that my fee be waived (You may request this option only if you are filing for Chapter 7. In a judge may, but is not required to, waive your fee, and may do so only if your income is than 150% of the official poverty line that applies to your family size and you are unable to the fee in installments). If you choose this option, you must fill out the Application to Have the other 7 Filing Fee Waived (Official Form 103B) and file it with your petition.					
9.	Have you filed for bankruptcy within the last 8 years?	☑ No ☐ Yes.	District	When	MM / DD / YYYY	Case number Case number Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☑ No ☐ Yes.	District	When	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known		
11.	Do you rent your residence?	☑ No. ☐ Yes.	Go to line 12. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.					

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 4 of 64

Veronica L. Holloway Debtor 1

ACTUAL TO A CONTRACT OF A CONT	
t Name Middle Name Last	N

Case number (if known)

	Are you a sole proprietor of any full- or part-time	☐ No. Go to Part 4. ☑ Yes. Name and location of business						
	business?							
	A sole proprietorship is a business you operate as an		Home for Tots					
	individual, and is not a		Name of business, if any					
	separate legal entity such as a corporation, partnership, or LLC. If you have more than one		4600 Flossmoor F	Road				
			Number Street					
	sole proprietorship, use a separate sheet and attach it		Country Club Hills	<u>.</u>		IL	60478	
	to this petition.		City			State	ZIP Code	
			Check the appropriate	box to describe	your busines	ss:		
			☐ Health Care Busine	ess (as defined	in 11 U.S.C. §	§ 101(27A))		
			☐ Single Asset Real I	Estate (as defin	ed in 11 U.S.	C. § 101(51I	3))	
			☐ Stockbroker (as de	fined in 11 U.S	.C. § 101(53A	A))		
			☐ Commodity Broker	(as defined in	11 U.S.C. § 10	01(6))		
			✓ None of the above	•		. ,,		
O a	Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	☑ No. □ No. □ Yes	the Bankruptcy Code. I am filing under Chapt Bankruptcy Code.	napter 11. eer 11, but I am eer 11 and I am	NOT a small a small busin	business de ess debtor a	btor according to the definition in according to the definition in the according to the definition in the	
	Do you own or have any	∠ No						
14.	property that poses or is		. What is the hazard?					
4.	alleged to pose a threat of imminent and	- res	. What is the hazard?					
4.	identifiable hazard to							
4.	public health or safety?							
4.								
4.	Or do you own any property that needs		If immediate attention	is pooded, wh	, in it nooded	2		
4.	Or do you own any property that needs immediate attention?		If immediate attention	is needed, wh	y is it needed	?		
4.	Or do you own any property that needs		If immediate attention	ı is needed, wh	y is it needed'	?		
4.	Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building		If immediate attention	······································		?		
4.	Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building				y is it needed'	?		
1.	Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building			······································		?		
4.	Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building			······································		?		

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 5 of 64

Debtor 1 Veronica L. Holloway

Case number (if known)

You must check one:

certificate of completion.

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

You must check one:

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:		

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a

filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

☐ I received a briefing from an approved credit
counseling agency within the 180 days before
filed this bankruptcy petition, and I received a

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 6 of 64

		olloway	Case number (if kno	Case number (if known)		
	First Name Middle Name	e Last Name				
P	art 6: Answer These Ques	tions for Reporting Purpos	ses			
	ALCO ANOTHER THESE CASE	ations for Roperting Fairpoo				
16.	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
	you nave.	☐ No. Go to line 16b. ☑ Yes. Go to line 17.				
			rily business debts? Business debts nvestment or through the operation of the			
		No. Go to line 16c. Yes. Go to line 17.				
		16c. State the type of debts yo	ou owe that are not consumer debts or bus	siness debts.		
17	Are you filing under	-				
,,,	Chapter 7?	☐ No. I am not filing under C	Chapter 7. Go to line 18.			
	Do you estimate that after	Yes. I am filing under Chap	oter 7. Do you estimate that after any exer es are paid that funds will be available to	npt property is excluded and		
	any exempt property is excluded and	administrative expens ✓ No	es are paid that funds will be available to	distribute to drisecured creditors:		
	administrative expenses	☐ Yes				
	are paid that funds will be available for distribution	□ Yes				
	to unsecured creditors?					
18.	How many creditors do you estimate that you	1 -49	1 ,000-5,000	2 5,001-50,000		
		50-99	5,001-10,000	50,001-100,000		
	owe?	100-199 200-999	1 0,001-25,000	☐ More than 100,000		
19.	How much do you estimate your assets to	\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion		
	e worth?	□ \$50,001-\$100,000 □ \$100,001-\$500,000	□ \$10,000,001-\$50 million □ \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion		
		□ \$500,001-\$1 million	\$100,000,001-\$500 million	☐ More than \$50 billion		
20	How much do you	\$0-\$50.000	☐ \$1,000,001-\$10 million	\$500,000,001-\$1 billion		
20.	estimate your liabilities	□ \$50,001-\$100.000	\$1,000,001-\$10 million	□ \$1,000,000,001-\$10 billion		
	to be?	\$100,001-\$500,000	\$50,000,001-\$100 million	☐ \$10,000,000,001-\$50 billion		
		☐ \$500,001-\$1 million	☐ \$100,000,001-\$500 million	☐ More than \$50 billion		
Pa	art 7: Sign Below					
Fo	or you	I have examined this petition, a correct.	and I declare under penalty of perjury that	the information provided is true and		
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fixes up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 2571/ / 27.8				
		* Veroncea	LAtallay x			
		Signature of Debtor 1	Signatur	re of Debtor 2		
		Executed on	Execute Execute			
		MM 7 DD	ľYYYY	MM / DD /YYYY		

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 7 of 64

	olloway	Case number (if known)	
First Name Middle Nam For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petitic to proceed under Chapter 7, 11, 12, or 13 of title 1 available under each chapter for which the person the notice required by 11 U.S.C. § 342(b) and, in a knowledge after an inquiry that the information in the Signature of Attorney for Debtor	 United States Code, an is eligible. I also certify th case in which § 707(b)(4) 	d have explained the relief at I have delivered to the debtor(s) (D) applies, certify that I have no
	Martin J. O'Hearn Printed name Law Offices of Martin J. O'Hearn Firm name 10047 South Western Avenue Number Street		
	Chicago City	IL State	60643 ZIP Code
	Contact phone <u>(773) 238-4400</u>	Email address	martinohearnlaw@sbcglobal.net
	6185904 Bar number	IL State	-

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation		
\$2	245	filing fee		
(\$75	administrative fee		
+ 5	\$15	trustee surcharge		
\$:	335	total fee		

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$31 <u>0</u>	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

<u>http://www.uscourts.gov/bkforms/bankruptcy_form_s.html</u>#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankru

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 12 of 64

Fill in this information to identify your case:						
Debtor 1	Veronica L. Hollowa					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States I	Bankruptcy Court for the: No	orthern District of Illinois				
Case number	(If known)					

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$116,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$22,665.00
1c. Copy line 63, Total of all property on Schedule A/B	\$138,665.00
art 2: Summarize Your Liabilities	_
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$169,586.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$4,988.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 95,182.57
Your total liabilities	\$ 269,756.57
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,350.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	_{\$} 2,318.00

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 13 of 64

Debtor 1

Veronica L. Holloway

Name Middle Name

Last Name

Case number (if known)_

Pa	Answer These Questions for Administrative and Statistical Records						
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form	orm to the court with your other sch	edules.				
7.	 What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. ✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 						
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	come from Official	2,589.00				
9.	Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :	Total claim					
	From Part 4 on Schedule E/F, copy the following:						
	9a. Domestic support obligations (Copy line 6a.)	\$					
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$4,988.00					
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$					
	9d. Student loans. (Copy line 6f.)	\$54,752.00					
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$					
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00					
	9g. Total. Add lines 9a through 9f.	\$59,740.00					

Fill in this information to identify your case and this filing:						
Debtor 1	Veronica L.	Holloway				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Northern District of Illinois						
Case number						

Official Form 106A/B

Schedule A/B: Property

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

-	o. Go to Part 2. es. Where is the propert	y?				
1.1.	4600 Flossmoor Road Street address, if available, or other description		description	What is the property? Check all that apply. ✓ Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D
	Street address, ii avaliabii	e, or other d		☐ Condominium or cooperative☐ Manufactured or mobile home☐ Land	Current value of the entire property? \$\text{115,000.00}\$	Current value of the portion you own?
	Country Club Hills	State	60478 ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	of your ownership simple, tenancy by
				Who has an interest in the property? Check one. Debtor 1 only	Fee Simple	
	Cook County			□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another Other information you wish to add about this its property identification number:		mmunity property
you	own or have more than	one, list h	iere:			
1.2.	Silverleaf Resorts			 What is the property? Check all that apply. Single-family home Duplex or multi-unit building 	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on <i>Schedule D</i>
	PO Box 1705	Street address, if available, or other description		☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	PO BOX 1705			Land	\$1,000.00	\$1,000.0
	Dallas City	TX State	75313 ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
				Who has an interest in the property? Check one.	Time Share	
				Debtor 1 only		
	County			Debtor 2 only	D	
				☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	(see instructions)	mmunity property
				Other information you wish to add about this item property identification number:	,	

33739 ase 16-'eronica L. Holloway Filed 10/21/16

Entered 10/21/16 17:59:24 Desc Main

Document Page 15 of 64 number (if known) What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home 0.00 0.00 ☐ Land ■ Investment property Describe the nature of your ownership City ☐ Timeshare State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: _ 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 116,000.00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No **✓** Yes Nissan Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.1 Make: the amount of any secured claims on Schedule D: Debtor 1 only Pathfinder Creditors Who Have Claims Secured by Property. Model: Debtor 2 only 2012 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only 57,000 entire property? portion you own? Approximate mileage: ☐ At least one of the debtors and another Other information: 21,000.00 21,000.00 ☐ Check if this is community property (see scratches and dents instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: 0.00 0.00 ☐ Check if this is community property (see instructions)

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Veronica L. Holloway Document Page 16 of 64 number (if known)

3.3	3. Make:	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure	
	Model:	Debtor 1 only	Creditors Who Have Clair	
	Year:	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	☐ At least one of the debtors and another	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
		☐ Check if this is community property (see	\$0.00	\$0.00
		instructions)		
		Who has an interest in the property? Check one.		
3.4	4. Make:	Debtor 1 only	Do not deduct secured cla the amount of any secure	
	Model:	Debtor 1 only Debtor 2 only	Creditors Who Have Clair	ms Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	☐ At least one of the debtors and another	entire property?	portion you own?
	Other information:		\$ 0.00	0.00
		☐ Check if this is community property (see	\$	\$
		instructions)		
4.	Yes 1. Make: Model:	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clause the amount of any secure Creditors Who Have Claim	ed claims on Schedule D:
	Year:	Debtor 2 only		
	Other information:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		A reast one of the desicis and another	entire property:	portion you own:
		☐ Check if this is community property (see instructions)	\$	\$0.00
lf v	/ou own or have more than one, list here:			
11 y	,	Who has an interest in the property? Check one.	5	
4.2		Debtor 1 only	Do not deduct secured cla the amount of any secure	ed claims on Schedule D:
	Model:	Debtor 2 only	Creditors Who Have Clair	ms Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Other information:	☐ At least one of the debtors and another	entire property?	portion you own?
			0.00	0.00
		☐ Check if this is community property (see	Φ	Φ
		instructions)		
- 4.1	Iddha dallara da esta de esta			04.000.00
		n for all of your entries from Part 2, including any entries Imber here		\$21,000.00
, ,				

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Veronica L. Holloway First Name Middle Name Last Name Document Page 17 of 64 number (if known)

Part 3: **Describe Your Personal and Household Items**

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.	s
6.	Household goods and furnishings		
	Examples: Major appliances, furniture, linens, china, kitchenware		
	□ No		
	Yes. Describe Stove, furniture, kitchenware	\$400.00	<u>)</u>
7	Electronics		
7.	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
	□ No □ Yes. Describe TV, cell phone	\$550.00	2
8	Collectibles of value		
-	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles		
	Stamp, coin, or baseball card collections, other collections, memorabilia, collectibles No		
	Yes. Describe	\$0.00)
9.	Equipment for sports and hobbies		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
	☑ No	_	
	☐ Yes. Describe	\$0.00	<u>C</u>
10	Firearms		
10	Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
	✓ No		
	Yes. Describe	\$ 0.00)
			_
11	Clothes		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No		
	✓ Yes. Describe Everyday clothes/shoes	\$50.00	<u>)</u>
		-	
12	Jewelry		
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	✓ No ☐ Yes. Describe	\$ 0.00)
			_
13	Non-farm animals Examples: Dogs, cats, birds, horses		
	□ No		
		\$ 30.00)
	Yes. Describe	\$\$	_
14	Any other personal and household items you did not already list, including any health aids you did not list		
	☑ No	7	
	Yes. Give specific information	\$0.00	<u> </u>
15	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$	<u> </u>
	for Part 3. Write that number here		_

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Veronica L. Holloway First Name Middle Name Last Name Document Page 18 of 64 number (if known)

Part 4: **Describe Your Financial Assets**

Do you own or have an	y legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured clair or exemptions.
16. Cash <i>Examples:</i> Money you	u have in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file your	petition
☐ No ☑ Yes			\$200.00
		ints; certificates of deposit; shares in credit unions, broker ultiple accounts with the same institution, list each.	age houses,
No Yes	omma moduliono. Il you have il	Institution name:	
	17.1. Checking account:	First Midwest Bank	\$ 200.00
	17.2. Checking account:	First Midwest Bank	\$ 120.00
	17.3. Savings account:	Great Lakes Credit Union	\$ 5.00
	17.4. Savings account:		\$ 0.00
	17.5. Certificates of deposit:		\$ 0.00
	17.6. Other financial account:		\$ 0.00
	17.7. Other financial account:		\$ 0.00
	17.8. Other financial account:		\$ 0.00
	17.9. Other financial account:		\$
	s, or publicly traded stocks s, investment accounts with brok Institution or issuer name:	erage firms, money market accounts	
		rated and unincorporated businesses, including an in	Ψ
 Non-publicly traded an LLC, partnership, No 	-	% of ow	nership:
an LLC, partnership, ✓ No ☐ Yes. Give specific	Name of entity:	% of ow 0%	nership: % \$0.00
an LLC, partnership, No	Name of entity:		0.00

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Veronica L. Holloway Document Page 19 of 64 number (if known)

20.			er negotiable and non-negotiable instruments ks, cashiers' checks, promissory notes, and money orders.		
	Non-negotiable instrume		not transfer to someone by signing or delivering them.		
	☑ No				
	Yes. Give specific information about them	Issuer name:		\$	0.00
				\$	0.00
				\$	0.00
21.	Retirement or pension Examples: Interests in II		1(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans		
	☑ No	- , , 	· (-), · · · · (-), · · · · · · · · · · · · · · · · · · ·		
	Yes. List each				
	account separately.	Type of account:	Institution name:		
		401(k) or similar plan:		\$	0.00
		Pension plan:		\$	0.00
		IRA:		\$	0.00
		Retirement account:		\$	0.00
		Keogh:		\$	0.00
		Additional account:		\$	0.00
		Additional account:		¢	0.00
			ade so that you may continue service or use from a company I rent, public utilities (electric, gas, water), telecommunications		
	☑ No				
	☐ Yes	Inst	titution name or individual:		
		Electric:		\$	0.00
		Gas:		\$	0.00
		Heating oil:		\$	0.00
		Security deposit on rent	tal unit:	\$	0.00
		Prepaid rent:		\$	0.00
		Telephone:		\$	0.00
		Water:		\$	0.00
		Rented furniture:		\$	0.00
		Other:		\$	0.00
23.	Annuities (A contract fo	r a periodic payment o	f money to you, either for life or for a number of years)		
	No No				
	☐ Yes	Issuer name and desc	eription:		0.00
				\$	0.00
				\$	0.00
				Φ	0.00

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Veronica L. Holloway First Name Middle Name Last Name Document Page 20 of 64 number (if known)

24. Interests in an education IRA 26 U.S.C. §§ 530(b)(1), 529A ✓ No		unt in a qualified ABLE program, or under a qualified state ()(1).	tuition program.		
☐ Yes	· Institution na	ame and description. Separately file the records of any interes	ts.11 U.S.C. § 521(c)		
				\$	0.00
				\$	0.00
				\$	0.00
		operty (other than anything listed in line 1), and rights or p	oowers		
exercisable for your benefit No	ı				
Yes. Give specific					
information about them				\$	0.00
		ecrets, and other intellectual property s, proceeds from royalties and licensing agreements			
Yes. Give specific information about them				\$	0.00
mormation about them				Ψ	
	-	ntangibles ses, cooperative association holdings, liquor licenses, professi	onal licenses		
✓ No☐ Yes. Give specific					
information about them				\$	0.00
Money or property owed to you	u?			Current value portion you Do not deduct claims or exem	own? secured
28. Tax refunds owed to you					
☑ No	-				
Yes. Give specific informa about them, including			Federal: \$		0.00
you already filed the	returns		State: \$		0.00
and the tax years			Local: \$		0.00
	_				
29. Family support Examples: Past due or lump s ✓ No	sum alimony, s	spousal support, child support, maintenance, divorce settlemer	nt, property settlemen	t	
☐ Yes. Give specific informa	ation				0.00
			limony:	\$	0.00
			laintenance:	\$ ¢	0.00
			upport: vivorce settlement:	Φ \$	0.00
			roperty settlement:	\$	0.00
Social Security be	sability insuran	ce payments, disability benefits, sick pay, vacation pay, worke loans you made to someone else	ers' compensation,		
No					
Yes. Give specific information	ation				0.00
				\$	0.00

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Veronica L. Holloway Document Page 21 of 64 number (if known)

31. Interests in insurance policies <i>Examples:</i> Health, disability, or life insurance	ce; health savings account (HSA);	credit, homeowner's, or renter's insurance		
☑ No				
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender (or refund value:
. ,			\$	0.00
			\$	0.00
			\$	0.00
property because someone has died. No		ce policy, or are currently entitled to receive		
☐ Yes. Give specific information			\$	0.00
33. Claims against third parties, whether or Examples: Accidents, employment dispute ✓ No ✓ Yes. Describe each claim. 34. Other contingent and unliquidated claim to set off claims ✓ No ✓ Yes. Describe each claim.	s, insurance claims, or rights to su	e	\$\$	0.00
✓ No ☐ Yes. Give specific information			\$	0.00
36. Add the dollar value of all of your entrie for Part 4. Write that number here	, ,		\$	525.00
Part 5: Describe Any Business-I 37. Do you own or have any legal or equitable No. Go to Part 6. Yes. Go to line 38.		n or Have an Interest In. List any r	current val	ue of the
			-	t secured claims
38. Accounts receivable or commissions yo	u already earned			
Yes. Describe				0.00
			\$	0.00
39. Office equipment, furnishings, and supp Examples: Business-related computers, softwareNo		nes, rugs, telephones, desks, chairs, electronic devices	;	
Yes. Describe			\$	0.00

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Veronica L. Holloway Document Page 22 of 64 number (if known)

40. Machinery, fixtures, equi	pment, supplies you use in business, and tools of your trade			
☐ No ☐ Yes. Describe	mputer, printer, file cabinet		\$110.0	0
41. Inventory No			-	
Yes. Describe			\$0.0	0
42. Interests in partnerships	or joint ventures			
☑ No				
☐ Yes. Describe Na	ame of entity:	% of ownership:		_
_		%	\$	
_		% %	\$ 0.0	
_				
43. Customer lists, mailing li	ists, or other compilations			
	clude personally identifiable information (as defined in 11 U.S.C. § 101(41)	A))?		
☐ No			7	
☐ Yes. Describe	9		\$0.0	0
A Annahan bandan a maladada ma				
44. Any business-related pro	operty you did not already list			
Yes. Give specific			\$0.0	0
information —			\$ 0.0	0
			\$ 0.0	0
			\$ 0.0	0
_			\$0.0	0
_			\$0.0	0
	ıll of your entries from Part 5, including any entries for pages you have a		\$110.0	0
				_
	Farm- and Commercial Fishing-Related Property You Own or Have an interest in farmland, list it in Part 1.	ave an Interest In	-	
46. Do you own or have any ✓ No. Go to Part 7. ☐ Yes. Go to line 47.	legal or equitable interest in any farm- or commercial fishing-related pro	pperty?		
			Current value of the portion you own? Do not deduct secured claim or exemptions.	IS
47. Farm animals	Itry farm-raised fish			
Examples: Livestock, poul No	ary, rami-raiseu lism			
☐ Yes]	
			\$0.0	0

Deb

otor 1	Case 16 Veronica L	5-33739 Holloway	Doc 1	Filed 10/21/16	Entered 10/21/16 17:59:24 Page 23 of 64 number (if known)	Desc Main	
	First Name	Middle Name	Last Na	me	1 ago 20 01 01		

48. Crops—either growing or harvested					
✓ No Yes. Give specific information					\$ 0.00
49. Farm and fishing equipment, implements, machinery, fixtur ☑ No	es, and to	ols of trade			
☐ Yes					\$ 0.00
50. Farm and fishing supplies, chemicals, and feed					
☑ No ☐ Yes					
				:	\$ 0.00
51. Any farm- and commercial fishing-related property you did No	not alread	y list			
Yes. Give specific information				:	\$ 0.00
52. Add the dollar value of all of your entries from Part 6, inclu-			-	• [\$	\$ 0.00
Part 7: Describe All Property You Own or Have	an Inte	rest in That `	You Did Not List Abov	/e	
53. Do you have other property of any kind you did not already Examples: Season tickets, country club membership	list?				
☑ No					\$ 0.00
Yes. Give specific information					\$ 0.00
					\$ 0.00
54. Add the dollar value of all of your entries from Part 7. Write	that numb	er here	-	•	\$ 0.00
Part 8: List the Totals of Each Part of this Form	m				
55. Part 1: Total real estate, line 2				→ \$	\$ 116,000.00
56. Part 2: Total vehicles, line 5	\$	21,000.00			
57. Part 3: Total personal and household items, line 15	\$	1,030.00			
58. Part 4: Total financial assets, line 36	\$	525.00			
59. Part 5: Total business-related property, line 45	\$	110.00			
60. Part 6: Total farm- and fishing-related property, line 52	\$	0.00			
61. Part 7: Total other property not listed, line 54	+ \$	0.00			
62. Total personal property. Add lines 56 through 61	. \$	22,665.00	Copy personal property total	→ +	\$ 22,665.00
63. Total of all property on Schedule A/B. Add line 55 + line 62				\$	\$ 138,665.00

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main

			ocament 1	auc z-
Fill in this in	formation to ide	entify your case:		
Debtor 1	Veronica L. F	Holloway		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court fo	or the: Northern District of II	linois	
Case number (If known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Part 1: Identify the Property You Claim as Exempt										
	 Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. 										
	Brief description	on of the property and line on that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption						
	Brief description: Line from Schedule A/B:	Residence 1.1	\$ <u>115,000.00</u>	■ \$\frac{15,000.00}{100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901						
	Brief description: Line from Schedule A/B:	Timeshare 1.2	\$_1,000.00	☑ \$ 0.00 ☐ 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12 -1001(b)						
	Brief description: Line from Schedule A/B:	2012 Nissan Pathfinder	\$21,000.00	☑ \$ 2,400.00 ☐ 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)						
3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) ✓ No ✓ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ✓ No ✓ Yes											

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 25 of 64 number (if known)

Veronica L. Holloway Debtor 1

Middle Name

Last Name

Additional Page Part 2:

	on of the property and line d/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:	Household Goods 6	\$400.00	\$ 400.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	Electronics 7	\$550.00	\$550.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	Clothes 11	\$50.00	\$ 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)(e)
Brief description: Line from Schedule A/B:	Dog	\$30.00	■ 30.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	<u>Cash</u>	\$200.00	■ 200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	Deposits of Money 17	\$325.00	■ 325.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	Tools of Trade	\$110.00	■ 1,500.00 ■ 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(d)
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 26 of 64

			G	<u>. age =</u> e						
Fill in this information to identify your case:										
Debtor 1	Veronica L. I	Holloway								
	First Name	Middle Name	Last Name							
Debtor 2										
(Spouse, if filing)	First Name	Middle Name	Last Name							
United States Bankruptcy Court for the: Northern District of Illinois										
Case number (If known)										

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

Part 1: List All Secu	ıred C	laims				
for each claim. If more As much as possible, li	than or	ne creditor h	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. nabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	portion If any
Bayview Loan Se	rvicing	9	Describe the property that secures the claim:	\$145,363.00	\$ 115,000.00	\$ 30,363.00
Creditor's Name 4425 Ponce De L Number Street	.eon		4600 Flossmoor Road Country Club Hills, IL 60478	arrears	6 0.00	
Coral Gables	FL State	33146 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Che	eck one.		Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt Check if this claim recommunity debt	ors and		 ✓ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) 	_		
Date debt was incurred			Last 4 digits of account number			
Silverleaf Resorts	/Club		Describe the property that secures the claim:	\$5,700.00	\$1,000.00	\$ 4,700.00
PO Box 1705 Number Street			Time Share	arrears \$	0	
Dallas	TX State	75313 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
City		ZIP Code	☐ Disputed			
Who owes the debt? Che	eck one.		Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2	only		 An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) 			
At least one of the debt	,	another	☐ Judgment lien from a lawsuit			
Check if this claim recommunity debt	elates to	оа	Other (including a right to offset) Time Share	_		
Date debt was incurred			Last 4 digits of account number 3 6 3 4			
Add the dollar value	of you	r entries in	Column A on this page. Write that number here:	\$151,063.00		

Entered 10/21/16 17:59:24 Case 16-33739 Doc 1 Filed 10/21/16

Desc Main

Document Page 27 of 64 Veronica L. Holloway Case number (if known) Debtor 1 Last Name First Name Column A Column B Column C **Additional Page** Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them beginning with 2.3, followed that supports this portion Do not deduct the by 2.4, and so forth. claim value of collateral 2.3 Nissan Motor Accept Corp 21,000.00 0.000 18,523.00 Describe the property that secures the claim: Creditor's Name PO Box 660360 2012 Nissan Pathfinder Number Street arrears \$ 0 00 As of the date you file, the claim is: Check all that apply. 75266 Dallas TX Contingent City State ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Statutory lien (such as tax lien, mechanic's lien) ■ Debtor 1 and Debtor 2 only ☐ Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) ☐ Check if this claim relates to a community debt Last 4 digits of account number 0 0 1 Date debt was incurred 2.4 Describe the property that secures the claim: Creditor's Name arrears \$ Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code Disputed Who owes the debt? Check one Nature of lien. Check all that apply. ☐ Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 2.5 Describe the property that secures the claim: Creditor's Name Number arrears \$ As of the date you file, the claim is: Check all that apply. Contingent City ZIP Code Unliquidated State Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only ☐ An agreement you made (such as mortgage or secured Debtor 2 only car loan) ☐ Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a

community debt

Date debt was incurred

Write that number here:

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

18,523.00

169,586.00

Е	Case 16-33/39 DOC 1		.0/21/16 17:5 64	9.24 DE	SC Main	
Ľ						
D	ebtor 1 Veronica L. Holloway First Name Middle Name					
 _	First Name Middle Name ebtor 2	Last Name				
	Spouse, if filing) First Name Middle Name	Last Name				
U	nited States Bankruptcy Court for the: Northern District	of Illinois				
	ase number					k if this is an
	f known)				amen	ded filing
\cap	fficial Form 106E/F					
_	chedule E/F: Creditors V	Vho Have Unsecur	ad Claime	2		12/15
_						
Lis A/E cre nec	as complete and accurate as possible. Use Part the other party to any executory contracts or use. Property (Official Form 106A/B) and on Scheel ditors with partially secured claims that are listeded, copy the Part you need, fill it out, number y additional pages, write your name and case number that are listed to the part of the	Inexpired leases that could result in fule G: Executory Contracts and Une ed in Schedule D: Creditors Who Have the entries in the boxes on the left. A imber (if known).	a claim. Also list o expired Leases (Offive Claims Secured	executory co ficial Form 10 <i>by Property</i> .	ntracts on So 6G). Do not i If more spac	hedule nclude any e is
1.	Do any creditors have priority unsecured claim No. Go to Part 2. Yes.	s against you?				
2.	List all of your priority unsecured claims. If a call each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of	a claim has both priority and nonpriorit claims in alphabetical order according t Part 1. If more than one creditor holds	ty amounts, list that to the creditor's nam a particular claim, li	claim here and ne. If you have	d show both p more than tw	riority and o priority
	(For an explanation of each type of claim, see the	instructions for this form in the instruction		Total claim	Priority	Nonpriority
	-			Total Glaiiii	amount	amount
2.1	Internal Revenue Service	Last 4 digits of account number 2	0 8 3 \$	2,502.00	\$ 2 502 00	\$ 0.00
	Priority Creditor's Name	0/		2,002.00	¥_ <i>L</i> ,00 <i>L</i> .00	· · · · · · · · · · · · · · · · · · ·
	PO Box 7346 Number Street	When was the debt incurred? 20	014			
		As of the date you file, the claim is:	Check all that apply.			
	Philadelphia PA 19101	☐ Contingent				
	City State ZIP Code	Unliquidated				
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed				
	Debtor 2 only	Type of PRIORITY unsecured clai	m·			
	Debtor 1 and Debtor 2 only	Domestic support obligations				
	☐ At least one of the debtors and another	Taxes and certain other debts you ov	we the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury w				
	Is the claim subject to offset?	intoxicated	nine you were			
	☑ No	Other. Specify				
	Yes					
2.2	Internal Revenue Service	Last 4 digits of account number _2	<u> 0 8 3</u> _{\$}	2,486.00	\$ 2,486.00	\$ 0.00
	Priority Creditor's Name PO Box 7346		015			
	Number Street					
	<u></u>	As of the date you file, the claim is:	Check all that apply.			
	Philadelphia PA 19101	Contingent				
	City State ZIP Code	Unliquidated				
	Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	Type of PRIORITY unsecured clai	m:			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Domestic support obligations				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	✓ Taxes and certain other debts you own	we the government			
	Check if this claim is for a community debt	Claims for death or personal injury w	hile you were			
	Is the claim subject to offset?	intoxicated				
		Other. Specify				

VEASTR 16-33739ay Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Pirst Name Middle Name Document Page 29 of 64

List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority un ☐ No. You have nothing to report in th ☐ Yes					
	nonpriority unsecured claim, list the cred	ditor separa ditor holds	ately for each clain	order of the creditor who holds each claim. If a creditor has not each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no	list claims a	already
					Total clai	im
4.1	Federal Loan Servicing			Last 4 digits of account number 2 0 8 6		
	Nonpriority Creditor's Name				\$54	,752.00
	PO Box 60610			When was the debt incurred?		
	Number Street		4=400	•		
	Harrisburg City	PA State	17106 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Oity	Glate	Zii Gode	_		
	Who incurred the debt? Check one.			☐ Contingent☐ Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only					
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			☑ Student loans		
	☐ Check if this claim is for a commu	nity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	i	
	☑ No			Other. Specify		
	☐ Yes					
4.2	Capital One Bank USA NA			Last 4 digits of account number 0 9 2 1	\$ 4.	,115.00
7.2	Nonpriority Creditor's Name			When was the debt incurred?	Ψ	<u>′</u>
	PO Box 30281					
	Number Street					
	Salt Lake City	UT	84130	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			☐ Disputed		
	☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			☐ Student loans		
				Obligations arising out of a separation agreement or divorce		
	☐ Check if this claim is for a commu	nity debt		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset? No			Other. Specify Credit Card		
	Yes			, , , , , , , , , , , , , , , , , , , ,		
4.3						
	Capital One Bank USA NA Nonpriority Creditor's Name			Last 4 digits of account number <u>3 9 9 0</u>	\$2	,040.00
	PO Box 30281			When was the debt incurred?		
	Number Street			-		
	Salt Lake City	UT	84130	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	☐ Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated		
	Debtor 1 only			Disputed		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only					
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:		
				Student loans		
	Check if this claim is for a commu	nity aebt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	i	
	✓ No ☐ Yes			Other. Specify <u>Credit Card</u>		
	_ 100					

c 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Last Name Document Page 30 of 64 √Case 16-33739av Doc 1 Filed 10/21/16 Desc Main

Par	t 2: Your NONPRIORITY Uns	secured C	laims — Continu	uation Page	
Afte	er listing any entries on this page,	number the	em beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.4	Capital One Bank USA NA			Last 4 digits of account number 7 4 1 7	\$_3,309.00
	Nonpriority Creditor's Name PO Box 30281			When was the debt incurred?	
	Number Street Salt Lake City	UT	84130	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anoth	ner		☐ Student loans	
	☐ Check if this claim is for a comm			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	,		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card	
	☑ No ☐ Yes				
	Tes				
4.5	SYNCB/TOYSRUS			Last 4 digits of account number	\$ 99.00
	Nonpriority Creditor's Name			When was the debt incurred?	
	PO Box 965005 Number Street			As of the date year file the claim in Charles II that and	
	Orlando City	FL State	32896 ZIP Code	As of the date you file, the claim is: Check all that apply.	
	·	State	ZIF Code	☐ Contingent☐ Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and anoth	ner		☐ Student loans	
	☐ Check if this claim is for a comm			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	numry debt		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify Credit Card	
	☐ No			Caroli, Spooliy Strain Strain	
	Yes				
4.6	Home Depot/CBNA			Last 4 digits of account number 5 3 1 6	\$_1,184.00
	Nonpriority Creditor's Name			When was the debt incurred?	
	PO Box 6497 Number Street			when was the dept incurred?	
	Sioux Falls	SD	57117	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent	

■ Unliquidated Who incurred the debt? Check one. ■ Disputed Debtor 1 only Debtor 2 only Type of **NONPRIORITY** unsecured claim: Debtor 1 and Debtor 2 only ■ Student loans ☐ At least one of the debtors and another lacksquare Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt $\hfill \Box$ Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ✓ Other Specify Credit Card ■ No

☐ Yes

VEASTR 16-38789ay Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main First Name Middle Name Document Page 31 of 64

Do	-4	∽.
	ш	74

Afte	r listing any entries on this page, numb	per then	n beginning wi	th 4.4, followed by 4.5, and so forth.	Total claim
4.7	JCPenney/SYNCB			Last 4 digits of account number 0 9 6 1	\$_2,396.00
	Nonpriority Creditor's Name PO Box 965007			When was the debt incurred?	
	Number Street Orlando F	FL	32896	As of the date you file, the claim is: Check all that apply.	
	•	ate	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only			Disputed	
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community	y debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ✓ No ☐ Yes			Other. Specify Credit Card	
4.8	Kohls Department Store			Last 4 digits of account number 8 4 5	\$80.71
	Nonpriority Creditor's Name PO Box 3115			When was the debt incurred?	
	Number Street Milwaukee V	۷I	53201	As of the date you file, the claim is: Check all that apply.	
		ate	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	✓ Debtor 1 only □ Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Student loans	
	☐ Check if this claim is for a community	, deht		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	y debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card	
	✓ No☐ Yes				
4.9	PLS Financial Solutions of IL			Last 4 digits of account number <u>1</u> <u>8</u> <u>C</u> <u>I</u>	\$ 2,873.10
	Nonpriority Creditor's Name 4031 B W. 183rd Street			When was the debt incurred?	
	Number Street	L	60478	As of the date you file, the claim is: Check all that apply.	
		ate	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a community	y debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ✓ No ☐ Yes			☑ Other. Specify Pay Day Loan	

VEASTE 16-33730ay Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main First Name Middle Name Document Page 32 of 64

Part 2:

Afte	r listing any entries on this page, nu	ımber the	m beginning with	n 4.4, followed by 4.5, and so forth.	Total claim
4.10	Personal Finance Company			Last 4 digits of account number 6 8 0 1	\$_1,628.00
	Nonpriority Creditor's Name 10945 S. Cicero Avenue			When was the debt incurred?	
	Number Street Oak Lawn	IL	60453	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commu	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			✓ Other. Specify Unsecured Personal Loan	
	☑ No ☐ Yes				
4.11	Personal Finance Company			Last 4 digits of account number 3 9 0 1	\$_1,396.00
	Nonpriority Creditor's Name			When was the debt incurred?	
	10945 S. Cicero Avenue Number Street				
	Oak Lawn	IL	60453	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent☐ Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only			T. (NONDRIGHTY	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another			☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a commu	nity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ✓ No			✓ Other. Specify Unsecured Personal Loan	
	Yes				
4.12	Rise			Last 4 digits of account number 2 0 8 3	\$ 2,397.00
	Nonpriority Creditor's Name			When was the debt incurred?	
	4150 International, #300				
	Fort Worth	TX	76109	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only			·	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Student loans	
	☐ Check if this claim is for a commu			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	, 4661		□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Unsecured Personal Loan	
	✓ No Yes			Unier. Specify Offise Cureu i ersorial Loaff	

VEASTE 16-33730ay Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main First Name Middle Name Document Page 33 of 64

Part 2:

Afte	er listing any entries on this page, nu	mber the	m beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.13	Sams/SYNCB			Last 4 digits of account number 3 2 4 7	\$_1,967.00
	Nonpriority Creditor's Name PO Box 965005			When was the debt incurred?	
	Number Street Orlando	FL	32896	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one. ✓ Debtor 1 only			Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 onlyAt least one of the debtors and another			Student loansObligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commu	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			✓ Other. Specify Credit Card	
	¥⊈ No ☐ Yes				
4.14	TD Bank USA/Target			Last 4 digits of account number 4 2 0 1	\$_7,618.00
	Nonpriority Creditor's Name PO Box 673			When was the debt incurred?	
	Number Street Minneapolis	MN	55440	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another			☐ Student loans	
	☐ Check if this claim is for a commu	nity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	inty debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card	
	✓ No □ Yes			, , , , , , , , , , , , , , , , , , ,	
4.15	Elastic			Last 4 digits of account number 5 9 2 1	\$_2,500.00
	Nonpriority Creditor's Name			When was the debt incurred?	
	9683 Kenwood Drive Number Street			As of the date you file, the claim is: Check all that apply.	
	Blue Ash City	OH	45242 ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only				
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim: Student loans	
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a commu	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ✓ No ☐ Yes			☑ Other. Specify	

VEASTE 16-33730ay Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main First Name Middle Name Document Page 34 of 64

_		_
	100	-
га	ш	~

Afte	r listing any entries on this page, number them	beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.16	City of Chgo-Dept of Finance (Tickets)		Last 4 digits of account number	s 810.00
	Nonpriority Creditor's Name PO Box 88292		When was the debt incurred?	Ψ
	Number Street		As of the date you file, the claim is: Check all that apply.	
	Chicago IL State	60680 ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.		Unliquidated Disputed	
	Debtor 1 only		·	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim: Student loans	
	☐ At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ✓ No		Other. Specify Tickets	
	Yes			
4.17				
	Synchrony Bank/Sam's Club c/o Meyer	& Njus PA	Last 4 digits of account number <u>0</u> <u>0</u> <u>0</u> <u>7</u>	\$ <u>1,967.18</u>
	Nonpriority Creditor's Name 200 S. Sixth Street; 1100 US Bank Plaz	7a	When was the debt incurred?	
	Number Street Minneapolis MN	55402	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed	
	Debtor 1 only		•	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim: Student loans	
	☐ At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ✓ No		Other. Specify Credit Card/Collection	
	Yes			
4.18				\$ 2,396.84
	Synchrony Bank/JCP c/o Meyer & Njus	PA	Last 4 digits of account number 4 0 9 6	Ψ
	200 S. Sixth Street; 1100 US Bank Plaz	za	When was the debt incurred?	
	Number Street Minneapolis MN	55402	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed	
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ✓ No ☐ Yes		Other. Specify Credit Card/Collection	

VEASTE 16-33730ay Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main First Name Middle Name Document Page 35 of 64

Part 2:

Afte	r listing any entries on this page, number then	n beginning wit	h 4.4, followed by 4.5, and so forth.	Total claim
4.19	The Home Depot/Citibank c/o Northlan	d Group	Last 4 digits of account number 5 3 1 6	\$_1,184.90
	Nonpriority Creditor's Name PO Box 390905; Mail Code CBK2		When was the debt incurred?	
	Number Street Minneapolis MN	55439	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated☐ Disputed	
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card/Collection	
	✓ No		other. Specify Credit Card/Collection	
	Yes			
4.20	Kohls/Capital One c/o Northland Group)	Last 4 digits of account number 8 4 5	\$ <u>468.84</u>
	Nonpriority Creditor's Name		— When was the debt incurred?	
	PO Box 390846; Mail Code KHL2 Number Street		As of the date you file, the claim is: Check all that apply.	
	Minneapolis MN City State	55439 ZIP Code	Contingent	
	Who incurred the debt? Check one.		Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt		you did not report as priority claims	
	Is the claim subject to offset?		□ Debts to pension or profit-sharing plans, and other similar debts☑ Other. Specify Credit Card/Collection	
	✓ No ☐ Yes			
4.21			Last 4 digits of account number	\$
	Nonpriority Creditor's Name		_	
	Number Street		When was the debt incurred?	
			As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.		Disputed	
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ☐ No		Other. Specify	
	Yes			

VERSITADIAN DOC 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main

First Name Middle Name Document Page 36 of 64

Part 3: List Others to Be Notified About a Debt That You Already Listed

TD Banl	k USA Target (Credit c/o All	iance One	On which entry in Part 1 or Part 2 did you list the original creditor?
4850 St	reet Road, #30	00		Line <u>4.14</u> of (<i>Check one</i>): ☐ Part 1: Creditors with Priority Unsecured Claims
Number	Street			✓ Part 2: Creditors with Nonpriority Unsecured Claim
				4 0 0 4
Trevose	•	PA	19053	Last 4 digits of account number 4 2 0 1
City		State	ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
INAITIE				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			□ Part 2: Creditors with Nonpriority Unsecured
				Claims
-				Last 4 digits of account number
City		State	ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Hame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
9			5545	Out the same to Board and Board and the same of the sa
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
rvui i i i i i i i i i i i i i i i i i i	Gueer			☐ Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number

√6859c16-3373√9av Doc 1

Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Page 37 of 64

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	ş0.	00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$4,988.	00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.	00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$0.	00
	6e. Total. Add lines 6a through 6d.	6e.	\$4,988.	00
			Total claim	
Total claims	6f. Student loans	6f.	\$54,752.	00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.	00_
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.	00
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i.	+ \$40,430.	57_
	6j. Total. Add lines 6f through 6i.	6j.	\$95,182.	57_

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 38 of 64

Fill in this information to identify your case:							
Debtor	Veronica L. Holloway						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse If filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: Northern District of Illinois							
Case number (If known)			_				

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with who	om you l	nave the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			-
	City		State	ZIP Code	-
2.2					
	Name				
	Number	Street			-
	City		State	ZIP Code	-
2.3					
	Name				-
	Number	Street			-
	City		State	ZIP Code	-
2.4					
	Name				-
	Number	Street			-
	City		State	ZIP Code	-
2.5					
	Name				-
	Number	Street			-
	City		State	ZIP Code	-

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main

Fill in this information to identify your case:						
Debtor 1	Veronica L. Holloway					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Northern District of Illinois						
Case number (If known)						

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

 Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No ✓ Yes 							
2.	Within the last 8 years, have you lived in a communit Arizona, California, Idaho, Louisiana, Nevada, New Mex						
	☑ No. Go to line 3.						
	lacksquare Yes. Did your spouse, former spouse, or legal equiva	alent live with you at the time?					
	☐ No						
	Yes. In which community state or territory did you	u live?	Fill in the name and current address of that person.				
	Name of your spouse, former spouse, or legal equivalent						
	Number Street						
	City State	ZIP Code					
3.	In Column 1, list all of your codebtors. Do not include	e your spouse as a codebtor	if your spouse is filing with you. List the person				
	shown in line 2 again as a codebtor only if that person	•	-				
	Schedule D (Official Form 106D), Schedule E/F (Offic Schedule E/F, or Schedule G to fill out Column 2.	ial Form 106E/F), or <i>Schedu</i>	le G (Official Form 106G). Use Schedule D,				
	Schedule E/F, or Schedule & to fill out Column 2.						
	Column 1: Your codebtor		Column 2: The creditor to whom you owe the debt				
			Check all schedules that apply:				
3.1	Adam Hallaway		```				
-	Adam Holloway		Schedule D, line				
	4600 Flossmoor Road		✓ Schedule E/F, line 4.10				
	Number Street	00.470	☐ Schedule G, line				
	Country Club Hills IL City State	60478 ZIP Code					
3.2	o., State	Zii Oodo					
0.2	Name		Schedule D, line				
	realite		☐ Schedule E/F, line				
	Number Street		Schedule G, line				
	City State	ZIP Code					
2 2	City State	ZIP Code					
3.3	Name		Schedule D, line				
	Name		☐ Schedule E/F, line				
	Number Street		Schedule G, line				
	City State	ZIP Code					

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 40 of 64

Fill in this information to identify y	your case:					
Debtor 1 Veronica L. Hollov	vav					
First Name	Middle Name	Last Name		-		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		-		
United States Bankruptcy Court for the:	Northern District of Illinois					
Case number				Check if	this is:	
(If known)					mended filing	
					oplement showing postpetition chapter	13
Official Form 106l					ne as of the following date:	
				MM /	DD / YYYY	
Schedule I: You	r Income				12/15	
supplying correct information. If yo If you are separated and your spous separate sheet to this form. On the Part 1: Describe Employment	se is not filing with you, o top of any additional pag	do not include info	ormati	on about your sp	you, include information about your spo ouse. If more space is needed, attach a known). Answer every question.	use.
Fill in your employment						
information.		Debtor 1			Debtor 2 or non-filing spouse	
If you have more than one job, attach a separate page with		□/				
information about additional employers.	Employment status	✓ Employed ☐ Not employed	ed		☐ Employed ☐ Not employed	
Include part-time, seasonal, or		,			, ,	
self-employed work.	Occupation	Daycare Prov	/ider			
Occupation may include student or homemaker, if it applies.	·	Colf Employe	۵			
	Employer's name	Self Employe	u		_	
	Employer's address	4600 Flossmo	oor R	oad		
		Number Street			Number Street	
						
		Country Club F	Hills State	IL 60478	City State ZIP Code	
	How long employed then	,	Otato	211 Oodc	Oldy State 211 Gode	
	now long employed their	e? <u>15 yrs</u>				
Part 2: Give Details About	Monthly Income					
	the date you file this form	n. If you have nothi	ng to r	eport for any line,	write \$0 in the space. Include your non-filing	
If you or your non-filing spouse ha below. If you need more space, at	ve more than one employe		rmatio	n for all employers	for that person on the lines	
				For Debtor 1	For Debtor 2 or	
					non-filing spouse	
List monthly gross wages, sala deductions). If not paid monthly, or the salar monthly, or the salar monthly and the salar monthly gross wages, salar mo			2.	\$ 0.00	\$ 0.00	
	calculate what the monthly			Ψ	¥	
3. Estimate and list monthly over	·		3.	+ \$ 0.00	+ \$0.00	

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 41 of 64

Veronica L. Holloway Debtor 1

First Name Middle Name Last Name

Case number (if known)_

		Fo	r Debtor 1			or 2 or	
				nor	n-filing	spouse	
Copy line 4 here	→ 4.	\$_	0.00	5	§	0.00	
5. List all payroll deductions:							
5a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	9	S	0.00	
5b. Mandatory contributions for retirement plans	5b.	\$_	0.00	. \$	S	0.00	
5c. Voluntary contributions for retirement plans	5c.	\$_	0.00	. \$	S	0.00	
5d. Required repayments of retirement fund loans	5d.	\$_	0.00	. \$	S	0.00	
5e. Insurance	5e.	\$_	0.00	. \$	S	0.00	
5f. Domestic support obligations	5f.	\$	0.00	. \$	S	0.00	
5g. Union dues	5g.	\$_	0.00	. \$	5	0.00	
5h. Other deductions. Specify:	5h.	+\$_	0.00	+ \$	5	0.00	
6. Add the payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5	h. 6.	\$	0.00	\$	5	0.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00		5	0.00	
8. List all other income regularly received:							
8a. Net income from rental property and from operating a business, profession, or farm							
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. See Attached	8a.	\$	2,350.00	\$	5	0.00	
8b. Interest and dividends	8b.	\$	0.00	\$	S	0.00	
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	dent						
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	\$	S	0.00	
8d. Unemployment compensation	8d.	\$	0.00	\$	5	0.00	
8e. Social Security	8e.	\$	0.00	\$	5	0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assist that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			0.00			0.00	
Specify:	_ 8f.	\$	0.00		5	0.00	
8g. Pension or retirement income	8g.	\$	0.00	\$	S	0.00	
8h. Other monthly income. Specify:	_ 8h.	+\$_	0.00	+ 9	S	0.00	
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	2,350.00	\$	S	0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	2,350.00	+ (§	0.00	= \$2,350.00
11. State all other regular contributions to the expenses that you list in <i>Sch</i> Include contributions from an unmarried partner, members of your household friends or relatives.	, your d	epend	•				
Do not include any amounts already included in lines 2-10 or amounts that an		/ailabl	e to pay expe	nses list	ed in S		⊦ \$ 0.00
Specify:						11. •	φ
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain				•	come.	12.	\$ 2,350.00 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this. No.	s form?	•					
Yes. Explain:							

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 42 of 64

B 106 I	(12/1)	5)
Continu	ation	page

Debtor 1	Veronica L. Holloway			
Debtor 2		Case No.		
			(if known)	

SCHEDULE I - YOUR INCOME

Continuation sheet for self-employed

PART 2: Give Details About Monthly Income (continued)

Regular income from operation of business:

Income:	
Sales	5336
Exp:	
Insurance	154
Office Expense	408
Repairs and Maint.	154
Supplies	430
Travel	543
Miscellaneous	50
Meals	1008
Total Exp	2747
Net Income	2589
Income Tax	239
Net Income	2350

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main

		D	ocument	Page 43	3 of 64
Debtor 1 Debtor 2 (Spouse, if filing) United States Case numbe (If known)	Veronica L. First Name g) First Name s Bankruptcy Court	Middle Name Middle Name for the: Northern District of Illin	Last Name Last Name nois		Check if this is: An amended filing A supplement showing postpetition chapter 13 expenses as of the following date: MM / DD / YYYY
Sche	dule J:	Your Expen	ses		12/15
Be as compl	lete and accurat	e as possible. If two marrie	ed people are fi	ling together,	both are equally responsible for supplying correct

information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

F	Part 1:	Describe Your Hous	sehold			
1.	☑ No. 0	oint case? Go to line 2. Ooes Debtor 2 live in a so	eparate household?			
		No Yes. Debtor 2 must file	Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.		
2.	Do you h	ave dependents?	□No	Dependent's relationship to	Dependent's	Does dependent live
	Do not lis Debtor 2.	t Debtor 1 and	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
		ate the dependents'	casii aspsiiasii	Son	23	☐ No ☑ Yes
				Son	22	☐ No ☑ Yes
						☐ No ☐ Yes
						☐ No ☐ Yes
						☐ No ☐ Yes
3.	expenses	expenses include s of people other than and your dependents?	☑ No ☐ Yes			
Pa	art 2:	Estimate Your Ongoi	ng Monthly Expenses			

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of Your expenses such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and 1,111.00 any rent for the ground or lot. If not included in line 4: 0.00 4a. Real estate taxes 4a. 0.00 4b. Property, homeowner's, or renter's insurance 4b. 20.00 4c. Home maintenance, repair, and upkeep expenses 4c. 0.00 4d. Homeowner's association or condominium dues 4d

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 44 of 64

Debtor 1

Veronica L. Holloway
First Name Middle Name

Last Name

Case number (if known)_

			Your ex	rpenses
5. A	dditional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6 L	Utilities:			
	sa. Electricity, heat, natural gas	6a.	\$	80.00
6	b. Water, sewer, garbage collection	6b.	\$	25.00
6	cc. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	75.00
6	d. Other. Specify:	6d.	\$	0.00
7. F	ood and housekeeping supplies	7.	\$	200.00
8. C	Childcare and children's education costs	8.	\$	0.00
9. C	Clothing, laundry, and dry cleaning	9.	\$	20.00
). F	Personal care products and services	10.	\$	20.00
ı. N	fledical and dental expenses	11.	\$	20.00
	ransportation. Include gas, maintenance, bus or train fare. On not include car payments.	12.	\$	50.00
3. E	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	Charitable contributions and religious donations	14.	\$	0.00
	nsurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
1	5a. Life insurance	15a.	\$	0.00
1	5b. Health insurance	15b.	\$	0.00
1	5c. Vehicle insurance	15c.	\$	154.00
1	5d. Other insurance. Specify:	15d.	\$	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
7. l ı	nstallment or lease payments:			
1	7a. Car payments for Vehicle 1	17a.	\$	543.00
1	7b. Car payments for Vehicle 2	17b.	\$	0.00
1	7c. Other. Specify:	17c.	\$	0.00
	7d. Other. Specify:	17d.	\$	0.00
3. Y	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9. C	Other payments you make to support others who do not live with you.			
S	pecify:	19.	\$	0.00
). C	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.		
2	20a. Mortgages on other property	20a.	\$	0.00
2	20b. Real estate taxes	20b.	\$	0.00
2	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
2	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
2	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 45 of 64

Debtor 1	Veronica L. Holloway First Name Middle Name Last Name Case number (in	f known)		
1. Other. Sp	pecify:	21.	+\$	0.00
2. Calculate	your monthly expenses.			
22a. Add	lines 4 through 21.	22a.	\$	2,318.00
22b. Cop	y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
22c. Add	line 22a and 22b. The result is your monthly expenses.	22c.	\$	2,318.00
23. Calculate	your monthly net income.			
	y line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,350.00
23b. Cop	y your monthly expenses from line 22c above.	23b.	-\$	2,318.00
	tract your monthly expenses from your monthly income. result is your monthly net income.	23c.	\$	32.00
4. Do you ex	pect an increase or decrease in your expenses within the year after you file this form?			
	ole, do you expect to finish paying for your car loan within the year or do you expect your payment to increase or decrease because of a modification to the terms of your mortgage?			
☑ No.				
Yes.	Explain here:			

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 46 of 64

l in this in	formation to ide	ntify your c	ase:			
btor 1	Veronica L. H	olloway				
btor 2	First Name	Midd	lle Name	Last Name		
ouse, if filing)	First Name	Midd	lle Name	Last Name		
ited States	Bankruptcy Court for	the: Northe	rn District of	Illinois		
ise number known)						
,						☐ Check if this is
						amended filing
			ut an	Individua	al Debtor's Schedules	12/15
ou must to	file this form whe	ing togethe never you y by fraud	er, both are of file bankrup in connection	equally responsible tcy schedules or an on with a bankruptc	for supplying correct information. needed schedules. Making a false statement, co y case can result in fines up to \$250,000, or impression.	ncealing property, or
ou must in the bears, or bear bear bear bear bear bear bear bea	file this form whe money or propert oth. 18 U.S.C. §§	ing togethe never you y by fraud 152, 1341,	er, both are of file bankrup in connection 1519, and 35	equally responsible tcy schedules or an on with a bankruptc 571.	for supplying correct information.	ncealing property, or
Ou must in butaining in ears, or but pour Did you	file this form whe money or propert oth. 18 U.S.C. §§ Sign Below	ing togethe never you y by fraud 152, 1341,	er, both are of file bankrup in connection 1519, and 35	equally responsible tcy schedules or an on with a bankruptc 571.	for supplying correct information. nended schedules. Making a false statement, co y case can result in fines up to \$250,000, or imp	ncealing property, or
Ou must in butaining in ears, or but pour Did you	file this form whe money or propert oth. 18 U.S.C. §§	ing togethe never you y by fraud 152, 1341,	er, both are of file bankrup in connection 1519, and 35	equally responsible tcy schedules or an on with a bankruptc 571.	for supplying correct information. nended schedules. Making a false statement, co y case can result in fines up to \$250,000, or imp	ncealing property, or risonment for up to 20

Date MM / DD / YYYY

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 47 of 64

Fill in this in	nformation to ide	Fill in this information to identify your case: Debtor 1 Veronica L. Holloway				
Debtor 1	Veronica L. F	Holloway Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States	Bankruptcy Court fo	r the: Northern District of I	linois			
Case number (If known)						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	n t is your current mar Married Not married	ital status?				
1	No	ave you lived anywhere	·			
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
	Number Street		. From To	Same as Debtor 1 Number Street		Same as Debtor 1 From To
	City	State ZIP Code	_	City	State ZIP Code	
	Number Street		. From To	Same as Debtor 1 Number Street		Same as Debtor 1 From To
state	es <i>and territori</i> es includ No	State ZIP Code id you ever live with a s de Arizona, California, Ida out Schedule H: Your Co	ho, Louisiana, Neva	da, New Mexico, Puerto Rio	State ZIP Code pperty state or territory? (co, Texas, Washington, and	Community property I Wisconsin.)

Part 2: Explain the Sources of Your Income

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 48 of 64

		Document	Page 48 of 64		
btor 1	Veronica L. Holloway First Name Middle Name Last N	Name	Case nur	mber (if known)	
Fil If y	d you have any income from employmen Il in the total amount of income you received you are filing a joint case and you have inco No Yes. Fill in the details.	d from all jobs and all busi	nesses, including part-tir	ne activities.	ndar years?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips☑ Operating a business	\$23,301.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For last calendar year: (January 1 to December 31, 2015 YYYY	☐ Wages, commissions, bonuses, tips☑ Operating a business	\$17,474.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
	For the calendar year before that: (January 1 to December 31, 2014 YYYY	☐ Wages, commissions, bonuses, tips☑ Operating a business	\$17,583.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
Indunga ga Lis	d you receive any other income during the clude income regardless of whether that income memployment, and other public benefit paymembling and lottery winnings. If you are filing st each source and the gross income from each No Yes. Fill in the details.	nome is taxable. Examples sents; pensions; rental income a joint case and you have each source separately. De	of other income are alimome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once you listed in line 4.	suits; royalties; and
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
	From January 1 of current year until the date you filed for bankruptcy:		\$ \$ \$		- \$ - \$ - \$
	For last calendar year:	capital loss	\$		- \$
	(January 1 to December 31,2015)		\$		- \$ - \$
					· -

For the calendar year before that: (January 1 to December 31,2014)

-2,100.00

capital loss

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 49 of 64

Debtor 1 Veronica L. Holloway

Cionica L.	Tionoway		
First Name	Middle Name	Last Name	

Case number (if known)_____

Part 3:	List Certain Payments You Made Before	e You Filed	for Bankruptcy		
6. Are eit	her Debtor 1's or Debtor 2's debts primarily co	nsumer debt	s?		
☐ No	Neither Debtor 1 nor Debtor 2 has primarily incurred by an individual primarily for a person			defined in 11 U.S.C. § 101(8	8) as
	During the 90 days before you filed for bankrup	-		5,425* or more?	
	☐ No. Go to line 7.				
	☐ Yes. List below each creditor to whom you	acid a tatal of	¢6.425* or more in one or	mare neuments and the	
	total amount you paid that creditor. Do child support and alimony. Also, do no	not include p	ayments for domestic supp	oort obligations, such as	
	* Subject to adjustment on 4/01/19 and every 3	years after th	at for cases filed on or afte	r the date of adjustment.	
☑ Ye	s. Debtor 1 or Debtor 2 or both have primarily o	consumer de	bts.		
	During the 90 days before you filed for bankrup	tcy, did you pa	ay any creditor a total of \$6	000 or more?	
	☐ No. Go to line 7.				
	Yes. List below each creditor to whom you perceditor. Do not include payments for alimony. Also, do not include payment.	domestic supp	ort obligations, such as ch	ild support and	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Bayview Loan Servicing	monthly	\$1,111.00	\$145,363.00	✓ Mortgage
	Creditor's Name				☐ Car
	4425 Ponce De Leon Number Street				☐ Credit card
					☐ Loan repayment
	Coral Gables FL 33146				☐ Suppliers or vendors
	City State ZIP Code				Other
	Nissan Motor Acceptance	monthly	\$543.00	\$18,523.00	☐ Mortgage
	Creditor's Name				∡ Car
	PO Box 660366 Number Street				☐ Credit card
					Loan repayment
	Dollar TV 75000				☐ Suppliers or vendors
	Dallas TX 75266 City State ZIP Code				☐ Other
			\$	\$	☐ Mortgage
	Creditor's Name		,		☐ Car
	New to Chart				Credit card
	Number Street				Loan repayment
					☐ Suppliers or vendors
	City State ZIP Code				Other
	Oity State ZIP Code				_

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 50 of 64

Case number (if known)_

Veronica L. Holloway

Middle Name

Last Name

First Name

Debtor 1

iders include your re rporations of which you ent, including one for th as child support a	a business you operate as a	; relatives of any rson in control, or	general partners; p r owner of 20% or	partnerships of which more of their voting	
No					
Yes. List all paymer	nts to an insider.				-
		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
			•		
Insider's Name			\$	\$	
		_			
Number Street					
		_			
City	State ZIP Code				
			\$	\$	
Insider's Name			-		
Number Street					
Number Street					
Number Street					
City	State ZIP Code				
City chin 1 year before your insider? lude payments on de		by an insider.			n account of a debt that benefited
City chin 1 year before your insider? lude payments on de	ou filed for bankruptcy, did		Dayments or trans	fer any property o Amount you still owe	
City chin 1 year before your insider? lude payments on de	ou filed for bankruptcy, did	by an insider.	Total amount	Amount you still owe	Reason for this payment
City chin 1 year before your insider? lude payments on de	ou filed for bankruptcy, did	by an insider.	Total amount	Amount you still	Reason for this payment
city chin 1 year before your insider? clude payments on de No Yes. List all paymer	ou filed for bankruptcy, did	by an insider.	Total amount	Amount you still owe	Reason for this payment
city chin 1 year before your insider? clude payments on de No Yes. List all paymer	ou filed for bankruptcy, did	by an insider.	Total amount	Amount you still owe	Reason for this payment
City chin 1 year before your insider? clude payments on deal No Yes. List all payments Insider's Name	ou filed for bankruptcy, did	by an insider.	Total amount	Amount you still owe	Reason for this payment
City chin 1 year before your insider? clude payments on deal No Yes. List all payments Insider's Name	ou filed for bankruptcy, did	by an insider.	Total amount	Amount you still owe	Reason for this payment
City chin 1 year before your insider? clude payments on deal No Yes. List all payments Insider's Name	ou filed for bankruptcy, did	by an insider.	Total amount	Amount you still owe	Reason for this payment
City chin 1 year before years insider? clude payments on de No Yes. List all paymer Insider's Name	ou filed for bankruptcy, did ebts guaranteed or cosigned nts that benefited an insider.	by an insider.	Total amount paid	Amount you still owe	Reason for this payment
city chin 1 year before yours insider? clude payments on de No Yes. List all payments Insider's Name Number Street City	ou filed for bankruptcy, did ebts guaranteed or cosigned nts that benefited an insider.	by an insider.	Total amount	Amount you still owe	Reason for this payment
City chin 1 year before years insider? clude payments on de No Yes. List all paymer Insider's Name	ou filed for bankruptcy, did ebts guaranteed or cosigned nts that benefited an insider.	by an insider.	Total amount paid	Amount you still owe	Reason for this payment

City

State

ZIP Code

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 51 of 64

Veronica L. Holloway Debtor 1

Within 1 year before you filed for bar List all such matters, including persona and contract disputes. Mo					
Yes. Fill in the details.	Nature	e of the case	Court or agency		Status of the case
Case title			Court Name		Pending On appeal
Case number			Number Street City State	zIP Code	Concluded
Case title			Court Name		Pending On appeal Concluded
			Number Street		Concluded
Case number Vithin 1 year before you filed for bar Check all that apply and fill in the detail		any of your property i	City State		
Vithin 1 year before you filed for bar		any of your property r	City State		ed, seized, or levied?
Vithin 1 year before you filed for bar Check all that apply and fill in the detail No. Go to line 11.			City State	rnished, attach	
Within 1 year before you filed for bar check all that apply and fill in the detail No. Go to line 11. Yes. Fill in the information below.			City State	rnished, attach	ed, seized, or levied? Value of the property
Within 1 year before you filed for bar Check all that apply and fill in the detail No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	s below.	Explain what happen Property was for Property was go	city State repossessed, foreclosed, ga	rnished, attach	ed, seized, or levied? Value of the property
Within 1 year before you filed for bar Check all that apply and fill in the detail No. Go to line 11. Yes. Fill in the information below. Creditor's Name		Explain what happen Property was for Property was go	repossessed, foreclosed, ga	rnished, attach	ed, seized, or levied? Value of the property
Within 1 year before you filed for bar check all that apply and fill in the detail No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	s below.	Explain what happen Property was re Property was fe Property was g Property was a	repossessed, foreclosed, ga	Date	Value of the property

City

State ZIP Code

☐ Property was attached, seized, or levied.

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 52 of 64

				 . a.g. c =	· · ·	
Debtor 1	Veronica	L. Holloway			Case number (if known)	
	First Name	Middle Name	Last Name		•	

No			
es. Fill in the details.			
	Describe the action the creditor took	Date action	Amount
No disease None		was taken	
Creditor's Name			
lumber Street	-	\$	S
	-		
City State ZIP Code	Last 4 digits of account number: XXXX		
	cy, was any of your property in the possession o	of an assignee for the benefit	of
litors, a court-appointed receiver, a cu	stodian, or another official?		
√es			
res			
List Certain Gifts and Contribu	tions		
	tcy, did you give any gifts with a total value of m	ore than \$600 per person?	
No			
es. Fill in the details for each gift.			
Gifts with a total value of more than \$600	Describe the gifts	Dates you gave	Value
per person	Describe the gifts	the gifts	value
	_		\$
Person to Whom You Gave the Gift	-		\$
Person to Whom You Gave the Gift	-		\$ \$
	-		\$
Person to Whom You Gave the Gift	-		\$ \$
lumber Street	-		\$\$
	-		\$ \$
lumber Street Sity State ZIP Code			\$ \$
State ZIP Code Person's relationship to you	- Decembe the wife		\$\$
Dumber Street State ZIP Code Person's relationship to you Sifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts	\$\$ \$
Jumber Street Sity State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts		\$\$ \$
State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person	Describe the gifts		\$
State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person	Describe the gifts		\$
State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person	Describe the gifts		
State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person	Describe the gifts		\$
State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts		\$
State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts		\$

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 53 of 64

Case number (if known)_

Veronica L. Holloway

Debtor 1

	First Name Middle Name Last N	lame		
14. Wit	hin 2 years before you filed for bankrup	cy, did you give any gifts or contributions with a total value	e of more than \$60	00 to any charity?
	No Yes. Fill in the details for each gift or contr	ibution.		
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
	All Nations Community Church Charity's Name		2014	\$2,456.00
	18620 Kedzie Avenue		2015	\$2,700.00
	Number Street			
	Homewood IL 60430 City State ZIP Code			
Part (6: List Certain Losses			
dis	thin 1 year before you filed for bankrupto aster, or gambling? No Yes. Fill in the details.	cy or since you filed for bankruptcy, did you lose anything l	because of theft, f	ire, other
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
				\$
Part 7	List Certain Payments or Trans	fore		
16. Wi t		cy, did you or anyone else acting on your behalf pay or tran	sfer any property	to anyone
		parers, or credit counseling agencies for services required in yo	our bankruptcy.	
	lude any attorneys, bankruptcy petition pre		Date payment or transfer was made	Amount of payment
	lude any attorneys, bankruptcy petition pre No Yes. Fill in the details. Law Offices of Martin J. O'Hearn	parers, or credit counseling agencies for services required in yo	Date payment or transfer was	Amount of payment \$ 1,400.00
	No Yes. Fill in the details. Law Offices of Martin J. O'Hearn Person Who Was Paid 10047 S. Western Avenue	Description and value of any property transferred Attorney's Fees 1/21/2016 \$500.00 2/25/2016 \$400.00	Date payment or transfer was made	
	No Yes. Fill in the details. Law Offices of Martin J. O'Hearn Person Who Was Paid 10047 S. Western Avenue Number Street Chicago IL 60643	Description and value of any property transferred Attorney's Fees 1/21/2016 \$500.00 2/25/2016 \$400.00	Date payment or transfer was made	

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 54 of 64

Document Page 34 01 04

Debtor 1 Veronica L. Holloway Case number (if known)______

Middle Name

Last Name

Access Counseling, Inc.	Out all to a second		transfer was made	payment
Person Who Was Paid	Credit Counseling		09/22/2016	\$14.9
Number Street	-			
	_			\$
City State ZIP Code	_			
City State ZIP Code www.AccessBk.org				
Email or website address	_			
Person Who Made the Payment, if Not You				
Vithin 1 year before you filed for bankrup fromised to help you deal with your cred to not include any payment or transfer that to No Yes. Fill in the details.	itors or to make payments to your cree			•
	Description and value of any property t	ransferred	Date payment or transfer was	Amount of payme
Person Who Was Paid	_		made	
Number Street	-			\$
	_			\$
City State ZIP Code	_			
ransferred in the ordinary course of your notude both outright transfers and transfers to not include gifts and transfers that you have the two transfers that you have the two transfers that you have the two transfers that you have the transfers that you have the transfers that you have transfers that you have the transfers that yo	made as security (such as the granting of	f a security interest or mo	or payments received	
Person Who Received Transfer	uansierieu	or debts paid in excitati	<u></u>	was made
Number Street				
Number Street City State ZIP Code				
City State ZIP Code				
City State ZIP Code Person's relationship to you	-			

Filed 10/21/16 Entered 10/21/16 17:50:2/

	Case 10-33739 Doc 1		55 of 64	.59.24 Desc N	παιι
Debtor 1	Veronica L. Holloway		Case number (if kno	wn)	
Dobto: 1		t Name	Caco nambor (,, x,,o	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
are a ☑ N	n 10 years before you filed for bankro beneficiary? (These are often called a lo es. Fill in the details.		ty to a self-settled trus	t or similar device of w	hich you
		Description and value of the propo	erty transferred		Date transfer was made
N _	ame of trust	_			
Part 8:	List Certain Financial Account	ts, Instruments, Safe Deposit	Boxes, and Storage	e Units	
close Inclu	in 1 year before you filed for bankrup ed, sold, moved, or transferred? de checking, savings, money market erage houses, pension funds, coope	, or other financial accounts; cert	ificates of deposit; sha	•	•
_	es. Fill in the details.				
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer

XXXX-_

				☐ Brokerage	
City	State	ZIP Code		☐ Other	
			XXXX-	☐ Checking \$	
Name of Financial I	Institution			Savings	
Number Street				☐ Money market	
				☐ Brokerage	
				☐ Other	
City	State				
ou now have, ourities, cash, or No	or did you h other valua		l year before you filed fo	bankruptcy, any safe deposit box or other depository for	
ırities, cash, or No	or did you h other valua	ave within 1	I year before you filed fo Who else had access to	it? Describe the contents D	
ırities, cash, or No	or did you h other valua	ave within 1		it? Describe the contents D	have it?
ırities, cash, or No	or did you h other valua details.	ave within 1		it? Describe the contents D	have it?
urities, cash, or No Yes. Fill in the d	or did you h other valua details.	ave within 1	Who else had access to	it? Describe the contents D	have it?
urities, cash, or No Yes. Fill in the d	or did you h other valua details.	ave within 1	Who else had access to	it? Describe the contents D	Do you have it? ☑ No ☑ Yes

☐ Checking

■ Savings

■ Money market

Name of Financial Institution

Number Street

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 56 of 64

Veronica L. H	Holloway		Case	number (if known)	
	Middle Name Last	st Name		, , , , , , , , , , , , , , , , , , ,	
	ty in a storage unit	or place other than your home	within 1 year	before you filed for bankruptc	y?
Í No					
Yes. Fill in the detai	ils.				
		Who else has or had access to i	t?	Describe the contents	Do you s have it?
					nave it?
					□ No
Name of Storage Facilit	ty	Name			☐ Yes
Number Street		Number Street			
		CityState ZIP Code			
City	State ZIP Code				
Oity	otate Zii oode				
t 9: Identify Pr	anamu Van Hald	an Cantral for Company Ele	_		
dentity Pr	operty rou noid	or Control for Someone Els			
o you hold or contro	I any property that s	someone else owns? Include ar	y property yo	u borrowed from, are storing	for,
or hold in trust for son	neone.			_	
☑ No					
Yes. Fill in the deta	ails.				
		Where is the property?		Describe the property	Value
		,	T		
·					
					\$
Owner's Name					
		Number Street			
Number Street		Number Street			
		Number Street			
Number Street	State ZIP Code	Number Street City State	ZIP Code		
Number Street City	State ZIP Code	City State	ZIP Code		
Number Street City			ZIP Code		
Number Street City 1 10: Give Detail	is About Environ	City State mental Information	ZIP Code		
Number Street City 1 10: Give Detail the purpose of Part 10	Is About Environ 0, the following defi	City State mental Information initions apply:			
Number Street City 1 10: Give Detail the purpose of Part 10: Environmental law me	Is About Environ 0, the following definant any federal, sta	City State mental Information initions apply: ate, or local statute or regulation	n concerning		
Number Street City 1 10: Give Detail the purpose of Part 10: Environmental law me nazardous or toxic sul	Is About Environ 0, the following defi eans any federal, sta bstances, wastes, o	mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil	n concerning	er, groundwater, or other med	
Number Street City 1 10: Give Detail the purpose of Part 10: Environmental law me nazardous or toxic sul ncluding statutes or r	Is About Environ 0, the following defi- eans any federal, sta- bstances, wastes, or regulations controlli	mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substa	n concerning , surface wate nces, wastes,	er, groundwater, or other med or material.	ium,
Number Street City 1 10: Give Detail the purpose of Part 10: Environmental law me nazardous or toxic sul ncluding statutes or r Site means any location	Is About Environment of the following define ans any federal, states that the federal of the fed	mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substaterty as defined under any enviro	n concerning , surface wate nces, wastes,	er, groundwater, or other med or material.	ium,
Number Street City 1 10: Give Detail the purpose of Part 10: Environmental law me nazardous or toxic sul ncluding statutes or r Site means any location	Is About Environment of the following define ans any federal, states that the federal of the fed	mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substa	n concerning , surface wate nces, wastes,	er, groundwater, or other med or material.	ium,
Number Street City 1 10: Give Detail the purpose of Part 10: Environmental law me nazardous or toxic sul ncluding statutes or resident means any location utilize it or used to ow thazardous material means and the street of	Is About Environment of the cans any federal, state that any sederal, state that are sederal to the cans any federal to the cans any federal to the cans anything an erong the cans are cansally the cansa	city State mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substated arty as defined under any enviroe it, including disposal sites.	n concerning , surface wate nces, wastes, nmental law,	er, groundwater, or other med or material. whether you now own, operat	ium, e, or
Number Street City 1 10: Give Detail the purpose of Part 10: Environmental law me nazardous or toxic sul ncluding statutes or resident means any location utilize it or used to ow thazardous material means and the street of	Is About Environment of the cans any federal, state that any sederal, state that are sederal to the cans any federal to the cans any federal to the cans anything an erong the cans are cansally the cansa	city State mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substated arty as defined under any envirous eit, including disposal sites.	n concerning , surface wate nces, wastes, nmental law,	er, groundwater, or other med or material. whether you now own, operat	ium, e, or
Number Street City The Give Detail The purpose of Part 10 Environmental law me nazardous or toxic sul ncluding statutes or resite means any location at lilize it or used to ow that are a means and the substance, hazardous	Is About Environment of the following define the following define the following define the following and following the following the following and the following the follo	city State mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substa erty as defined under any enviro e it, including disposal sites. anvironmental law defines as a h t, contaminant, or similar term.	n concerning I, surface wate nces, wastes, nmental law, azardous was	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, tox	ium, e, or
Number Street City The Give Detail The purpose of Part 10 Environmental law me nazardous or toxic sul ncluding statutes or resite means any location at lilize it or used to ow that are a means and the substance, hazardous	Is About Environment of the following define the following define the following define the following and following the following the following and the following the follo	city State mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substated arty as defined under any enviroe it, including disposal sites.	n concerning I, surface wate nces, wastes, nmental law, azardous was	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, tox	ium, e, or
Number Street City The Purpose of Part 10 Environmental law me nazardous or toxic sul ncluding statutes or resite means any location at lilize it or used to ow the lazardous material me substance, hazardous ort all notices, release or all notices.	Is About Environment of the following definances, wastes, or regulations controlling on, facility, or propern, operate, or utilized eans anything an error material, pollutant, es, and proceedings	city State mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substa erty as defined under any enviro e it, including disposal sites. anvironmental law defines as a h t, contaminant, or similar term.	n concerning I, surface wate nces, wastes, nmental law, azardous was	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, toxi ey occurred.	ium, e, or ic
Number Street City the purpose of Part 10 Environmental law me nazardous or toxic sul ncluding statutes or relations it or used to ow that are to a cutilize it or used to ow the cutilize it or	Is About Environment of the following definances, wastes, or regulations controlling on, facility, or propern, operate, or utilized eans anything an error material, pollutant, es, and proceedings	city State mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substa erty as defined under any enviro e it, including disposal sites. anvironmental law defines as a h b, contaminant, or similar term. s that you know about, regardle	n concerning I, surface wate nces, wastes, nmental law, azardous was	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, toxi ey occurred.	ium, e, or ic
Number Street City the purpose of Part 10 Environmental law me nazardous or toxic sul ncluding statutes or resident it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to a cutilize it or used to ow that are to a cutilize it or used to a cutilize it or used to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used t	Is About Environments O, the following definances, wastes, or regulations controlling on, facility, or proper, operate, or utilized eans anything an eramaterial, pollutant, res, and proceedings unit notified you the	city State mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substa erty as defined under any enviro e it, including disposal sites. anvironmental law defines as a h b, contaminant, or similar term. s that you know about, regardle	n concerning I, surface wate nces, wastes, nmental law, azardous was	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, toxi ey occurred.	ium, e, or ic
Number Street City the purpose of Part 10 Environmental law me nazardous or toxic sul ncluding statutes or relations it or used to ow that are to a cutilize it or used to ow the cutilize it or	Is About Environments O, the following definances, wastes, or regulations controlling on, facility, or proper, operate, or utilized eans anything an eramaterial, pollutant, res, and proceedings unit notified you the	city State mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substa erty as defined under any enviro e it, including disposal sites. anvironmental law defines as a h b, contaminant, or similar term. s that you know about, regardle	n concerning I, surface wate nces, wastes, nmental law, azardous was	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, toxi ey occurred.	ium, e, or ic
Number Street City the purpose of Part 10 Environmental law me nazardous or toxic sul ncluding statutes or resident it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to a cutilize it or used to ow that are to a cutilize it or used to a cutilize it or used to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used t	Is About Environments O, the following definances, wastes, or regulations controlling on, facility, or proper, operate, or utilized eans anything an eramaterial, pollutant, res, and proceedings unit notified you the	mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substa erty as defined under any enviro e it, including disposal sites. environmental law defines as a h environmental law defines a h environmental law defines as a h environmental law defines as	n concerning I, surface wate nces, wastes, nmental law, azardous was as of when th	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, toxi ey occurred. er or in violation of an environ	ium, e, or ic imental law?
Number Street City the purpose of Part 10 Environmental law me nazardous or toxic sul ncluding statutes or resident it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to a cutilize it or used to ow that are to a cutilize it or used to a cutilize it or used to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used t	Is About Environments O, the following definances, wastes, or regulations controlling on, facility, or proper, operate, or utilized eans anything an eramaterial, pollutant, res, and proceedings unit notified you the	city State mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substa erty as defined under any enviro e it, including disposal sites. anvironmental law defines as a h b, contaminant, or similar term. s that you know about, regardle	n concerning I, surface wate nces, wastes, nmental law, azardous was as of when th	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, toxi ey occurred.	ium, e, or ic
Number Street City the purpose of Part 10 Environmental law me nazardous or toxic sul ncluding statutes or resident it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to a cutilize it or used to ow that are to a cutilize it or used to a cutilize it or used to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used t	Is About Environments O, the following definances, wastes, or regulations controlling on, facility, or proper, operate, or utilized eans anything an eramaterial, pollutant, res, and proceedings unit notified you the	mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substa erty as defined under any enviro e it, including disposal sites. environmental law defines as a h environmental law defines a h environmental law defines as a h environmental law defines as	n concerning I, surface wate nces, wastes, nmental law, azardous was as of when th	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, toxi ey occurred. er or in violation of an environ	ium, e, or ic imental law?
Number Street City The purpose of Part 10 Environmental law me nazardous or toxic sul ncluding statutes or resident of the purpose of Part 10 Site means any location utilize it or used to ow the substance, hazardous nort all notices, released as any governmental No Yes. Fill in the detail	Is About Environments O, the following definances, wastes, or regulations controlling on, facility, or proper, operate, or utilized eans anything an eramaterial, pollutant, res, and proceedings unit notified you the	city State mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substated arty as defined under any envirouse it, including disposal sites. Invironmental law defines as a hand to a contaminant, or similar term. In that you know about, regardle that you may be liable or potential. Governmental unit	n concerning I, surface wate nces, wastes, nmental law, azardous was as of when th	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, toxi ey occurred. er or in violation of an environ	ium, e, or ic imental law?
Number Street City the purpose of Part 10 Environmental law me nazardous or toxic sul ncluding statutes or resident it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to a cutilize it or used to ow that are to a cutilize it or used to a cutilize it or used to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used to ow that are to a cutilize it or used t	Is About Environments O, the following definances, wastes, or regulations controlling on, facility, or proper, operate, or utilized eans anything an eramaterial, pollutant, res, and proceedings unit notified you the	mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substa erty as defined under any enviro e it, including disposal sites. environmental law defines as a h environmental law defines a h environmental law defines as a h environmental law defines as	n concerning I, surface wate nces, wastes, nmental law, azardous was as of when th	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, toxi ey occurred. er or in violation of an environ	ium, e, or ic imental law?
Number Street City 1 10: Give Detail the purpose of Part 10: Environmental law me nazardous or toxic sul ncluding statutes or resident of the state of the state of the substance, hazardous port all notices, released as any governmental No Yes. Fill in the detail	Is About Environments O, the following definances, wastes, or regulations controlling on, facility, or proper, operate, or utilized eans anything an eramaterial, pollutant, res, and proceedings unit notified you the	city State mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substated arty as defined under any envirouse it, including disposal sites. Invironmental law defines as a hand to a contaminant, or similar term. In that you know about, regardle that you may be liable or potential. Governmental unit	n concerning I, surface wate nces, wastes, nmental law, azardous was as of when th	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, toxi ey occurred. er or in violation of an environ	ium, e, or ic imental law?
Number Street City The purpose of Part 10 Environmental law me nazardous or toxic sul ncluding statutes or resident of the purpose of Part 10 Site means any location utilize it or used to ow the substance, hazardous nort all notices, released as any governmental No Yes. Fill in the detail	Is About Environments O, the following definances, wastes, or regulations controlling on, facility, or proper, operate, or utilized eans anything an eramaterial, pollutant, res, and proceedings unit notified you the	city State mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substated in the substated ind	n concerning I, surface wate nces, wastes, nmental law, azardous was as of when th	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, toxi ey occurred. er or in violation of an environ	ium, e, or ic imental law?
Number Street City 1 10: Give Detail the purpose of Part 10: Environmental law me nazardous or toxic sul ncluding statutes or resident of the state of the state of the substance, hazardous port all notices, released as any governmental No Yes. Fill in the detail	Is About Environments O, the following definances, wastes, or regulations controlling on, facility, or proper, operate, or utilized eans anything an eramaterial, pollutant, res, and proceedings unit notified you the	city State mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil ing the cleanup of these substated in the substated ind	n concerning I, surface wate nces, wastes, nmental law, azardous was as of when th	er, groundwater, or other med or material. whether you now own, operat ste, hazardous substance, toxi ey occurred. er or in violation of an environ	ium, e, or ic imental law?

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 57 of 64

Debtor 1	Veronica L.	Holloway		Case number (if known)	
	First Name	Middle Name	Last Name		

No			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	_	
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code	1		
e vou been a party in any judicial or	administrative proceeding under	any environmental law? Include settleme	ents and orders.
No	daministrative proceduring under	any environmental law . molade settleme	onto una oracio.
No Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the
	count of agonoy	ratars of the east	case
Case title			☐ Pending
	Court Name		On appe
	Number Street		Conclud
hin 4 years before you filed for bank	Business or Connections to A	r have any of the following connections t	to any business?
1: Give Details About Your I hin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability co	Business or Connections to A cruptcy, did you own a business or ed in a trade, profession, or other	ny Business r have any of the following connections to activity, either full-time or part-time	to any business?
1: Give Details About Your I hin 4 years before you filed for bank ✓ A sole proprietor or self-employ A member of a limited liability of A partner in a partnership	Business or Connections to A cruptcy, did you own a business of ed in a trade, profession, or other company (LLC) or limited liability pa	ny Business r have any of the following connections to activity, either full-time or part-time	to any business?
1: Give Details About Your I hin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability co	Business or Connections to A cruptcy, did you own a business or ed in a trade, profession, or other ompany (LLC) or limited liability page executive of a corporation	ny Business r have any of the following connections to activity, either full-time or part-time artnership (LLP)	to any business?
fin 4 years before you filed for bank ✓ A sole proprietor or self-employ A member of a limited liability or A partner in a partnership An officer, director, or managing An owner of at least 5% of the very	Business or Connections to A cruptcy, did you own a business or ed in a trade, profession, or other ompany (LLC) or limited liability page executive of a corporation oting or equity securities of a corp	ny Business r have any of the following connections to activity, either full-time or part-time artnership (LLP)	to any business?
1: Give Details About Your I hin 4 years before you filed for bank ✓ A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the vol No. None of the above applies. Go t	Business or Connections to A cruptcy, did you own a business or ed in a trade, profession, or other ompany (LLC) or limited liability page executive of a corporation oting or equity securities of a corporation or Part 12.	r have any of the following connections to activity, either full-time or part-time artnership (LLP)	to any business?
fin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability or A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go tyes. Check all that apply above and	Business or Connections to A cruptcy, did you own a business or ed in a trade, profession, or other ompany (LLC) or limited liability page executive of a corporation oting or equity securities of a corporation or Part 12.	ny Business Thave any of the following connections to activity, either full-time or part-time artnership (LLP) Foration usiness.	
fin 4 years before you filed for bank ✓ A sole proprietor or self-employ A member of a limited liability or A partner in a partnership An officer, director, or managing An owner of at least 5% of the very	Business or Connections to A cruptcy, did you own a business or ed in a trade, profession, or other ompany (LLC) or limited liability page executive of a corporation oting or equity securities of a corporation of Part 12.	r have any of the following connections to activity, either full-time or part-time artnership (LLP) coration usiness. Employer Identificati	
fin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to yes. Check all that apply above and Home for Tots Business Name	Business or Connections to A cruptcy, did you own a business or ed in a trade, profession, or other ompany (LLC) or limited liability page executive of a corporation oting or equity securities of a corporation of Part 12.	r have any of the following connections to activity, either full-time or part-time artnership (LLP) poration usiness. Employer Identification Do not include Social	on number
dive Details About Your In thin 4 years before you filed for bank	Business or Connections to A cruptcy, did you own a business of ed in a trade, profession, or other ompany (LLC) or limited liability page executive of a corporation oting or equity securities of a corporation of Part 12. I fill in the details below for each be Describe the nature of the business of a corporation of the business of a corporation of the business o	r have any of the following connections to activity, either full-time or part-time fartnership (LLP) foration usiness. Employer Identification Do not include Social	ion number al Security number or ITIN. Il security number
fin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to yes. Check all that apply above and Home for Tots Business Name 4600 Flossmoor Road	Business or Connections to A cruptcy, did you own a business or ed in a trade, profession, or other ompany (LLC) or limited liability page executive of a corporation oting or equity securities of a corporation of Part 12. If fill in the details below for each be Describe the nature of the business.	r have any of the following connections to activity, either full-time or part-time artnership (LLP) poration usiness. Employer Identificati Do not include Social	ion number al Security number or ITIN. Il security number
hin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to Yes. Check all that apply above and Home for Tots Business Name 4600 Flossmoor Road Number Street	Business or Connections to A cruptcy, did you own a business of ed in a trade, profession, or other ompany (LLC) or limited liability page executive of a corporation oting or equity securities of a corporation of Part 12. I fill in the details below for each business of a corporation of the business of the corporation of the cor	r have any of the following connections to activity, either full-time or part-time artnership (LLP) poration usiness. Employer Identificati Do not include Social EIN: USES SOCIAL poer	ion number al Security number or ITIN. Il security number
Give Details About Your Inhin 4 years before you filed for bank A sole proprietor or self-employ. A member of a limited liability of A partner in a partnership. An officer, director, or managing. An owner of at least 5% of the volume. An officer above applies. Go to Yes. Check all that apply above and Home for Tots. Business Name.	Business or Connections to A cruptcy, did you own a business of ed in a trade, profession, or other company (LLC) or limited liability pa g executive of a corporation oting or equity securities of a corp to Part 12. I fill in the details below for each b Describe the nature of the busin Daycare Name of accountant or bookker	r have any of the following connections to activity, either full-time or part-time artnership (LLP) poration usiness. Employer Identificati Do not include Social EIN: USES SOCIAL poer	ion number al Security number or ITIN. Il <u>Securi</u> ty number ted
dive Details About Your II hin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the vo No. None of the above applies. Go to Yes. Check all that apply above and Home for Tots Business Name 4600 Flossmoor Road Number Street Country Club Hills IL 60478	Business or Connections to A cruptcy, did you own a business of ed in a trade, profession, or other company (LLC) or limited liability pa g executive of a corporation oting or equity securities of a corp to Part 12. I fill in the details below for each b Describe the nature of the busin Daycare Name of accountant or bookker	r have any of the following connections to activity, either full-time or part-time artnership (LLP) foration usiness. Employer Identification Do not include Social EIN: USES SOCIA Eper Dates business existences From 2001	ion number al Security number or ITIN. Il <u>security number</u> ted To <u>NOW</u>
dive Details About Your II hin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the vo No. None of the above applies. Go to Yes. Check all that apply above and Home for Tots Business Name 4600 Flossmoor Road Number Street Country Club Hills IL 60478	Business or Connections to A cruptcy, did you own a business of ed in a trade, profession, or other ompany (LLC) or limited liability paragraphs of a corporation or equity securities of a corporation of Part 12. I fill in the details below for each business of a corporation of the business of a	r have any of the following connections to activity, either full-time or part-time artnership (LLP) foration usiness. Employer Identification Do not include Social EIN: USES SOCIA Eper Dates business existences From 2001	ion number al Security number or ITIN. Il <u>security number</u> ted To <u>NOW</u>
hin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to the self-employ above and Home for Tots Business Name 4600 Flossmoor Road Number Street Country Club Hills IL 60476 City State ZIP Code	Business or Connections to A cruptcy, did you own a business of ed in a trade, profession, or other ompany (LLC) or limited liability paragraphs of a corporation or equity securities of a corporation of Part 12. I fill in the details below for each business of a corporation of the business of a	r have any of the following connections to activity, either full-time or part-time artnership (LLP) poration usiness. Employer Identificati Do not include Social EIN: USES SOCIA From 2001 Employer Identificati Do not include Social	ion number al Security number or ITIN. Il <u>security number</u> ted To <u>NOW</u>
hin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to the self-employ above and Home for Tots Business Name 4600 Flossmoor Road Number Street Country Club Hills IL 60476 City State ZIP Code	Business or Connections to A cruptcy, did you own a business of ed in a trade, profession, or other ompany (LLC) or limited liability paragraphs of a corporation or equity securities of a corporation or equity securities of a corporation of the details below for each be Describe the nature of the busing Daycare Name of accountant or bookked Describe the nature of the busing D	r have any of the following connections to activity, either full-time or part-time artnership (LLP) foration usiness. Employer Identification Do not include Social EIN: USES SOCIA From 2001 Employer Identification Do not include Social EIN:	ion number al Security number or ITIN. I <u>Security number</u> ted To <u>NOW</u> ion number al Security number or ITIN.
hin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the vo No. None of the above applies. Go to Yes. Check all that apply above and Home for Tots Business Name 4600 Flossmoor Road Number Street Country Club Hills IL 60476 City State ZIP Code	Business or Connections to A cruptcy, did you own a business of ed in a trade, profession, or other ompany (LLC) or limited liability paragraphs of a corporation or equity securities of a corporation of Part 12. I fill in the details below for each business of a corporation of the business of a	r have any of the following connections to activity, either full-time or part-time artnership (LLP) foration usiness. Employer Identification Do not include Social EIN: USES SOCIA From 2001 Employer Identification Do not include Social EIN:	ion number al Security number or ITIN. I <u>Security number</u> ted To <u>NOW</u> ion number al Security number or ITIN.
hin 4 years before you filed for bank A sole proprietor or self-employ A member of a limited liability of A partner in a partnership An officer, director, or managing An owner of at least 5% of the vo No. None of the above applies. Go to Yes. Check all that apply above and Home for Tots Business Name 4600 Flossmoor Road Number Street Country Club Hills IL 60476 City State ZIP Code	Business or Connections to A cruptcy, did you own a business of ed in a trade, profession, or other ompany (LLC) or limited liability paragraphs of a corporation or equity securities of a corporation or equity securities of a corporation of the details below for each be Describe the nature of the busing Daycare Name of accountant or bookked Describe the nature of the busing D	r have any of the following connections of activity, either full-time or part-time artnership (LLP) foration usiness. ness	ion number al Security number or ITIN. I <u>Security number</u> ted To <u>NOW</u> ion number al Security number or ITIN.

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 58 of 64

Veronica L.	Middle Name	Last Name Ca	ise number (if known)
		Describe the nature of the business	Employer Identification number
		Describe the nature of the business	Do not include Social Security number or ITII
Business Name			EIN:
			EIN
Number Street		Name of accountant or bookkeeper	Dates business existed
			
			From To
City	State ZIP Co	de	-
thin 2 years hefor	e vou filed for bar	nkruptcy, did you give a financial statement to	anyone about your business? Include all financial
stitutions, credito	rs, or other partie:	s.	,
No			
Yes. Fill in the de	etails below.		
		Date issued	
Name		MM / DD / YYYY	
Number Street			
			
_			
City	State ZIP Co	de	
12: Sign Belo	w		
have read the ans	swers on this Stat	ement of Financial Affairs and any attachment	s, and I declare under penalty of perjury that the
answers are true a	and correct. I unde a hankruntey cas	se can result in fines up to \$250,000, or imprisc	ing property, or obtaining money or property by fra onment for up to 20 years, or both.
18 U.S.C. §§ 152, 1	1341, 1519, and 35	71	
1/		110.	
1/20	L'and Fo	1 10/1/1.	
× 1/ UAA	Millet -	trallery	
Signature of Deb	tor 1	Signature of Debtor 2	
- /a	1000	\mathcal{O}	
Date 9/21	12016	Date	
Did you attach add	ditional pages to	Your Statement of Financial Affairs for Individu	als Filing for Bankruptcy (Official Form 107)?
a you allaon au	pages to		
☑ No			
☐ Yes			
Did you pay or ag	ree to nav someo	ne who is not an attorney to help you fill out ba	nkruptcy forms?
y p y ug			
	, oo to pay comes		
☑ No ☑ Yes. Name of p			Attach the Bankruptcy Petition Preparer's Notice Declaration, and Signature (Official Form 119)

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 59 of 64

B2030 (Form 2030) (12/15)

United Stat	es Bankruptcy Court
Northern	District Of Illinois

In	ıre	
٧	/eronica L. Holloway	Case No.
De	ebtor(s)	Chapter 7
	DISCLOSURE OF COMPENSAT	ION OF ATTORNEY FOR DEBTOR
1.	named debtor(s) and that compensation paid to me v	rendered or to be rendered on behalf of the debtor(s) in
	For legal services, I have agreed to accept	_{\$} _1400.00
	Prior to the filing of this statement I have received.	_s 1400.00
	Balance Due	s 0.00
2.	The source of the compensation paid to me was:	
	Debtor Other (specify)	
3.	The source of compensation to be paid to me is:	
	Debtor Other (specify)	
١.	I have not agreed to share the above-disclos members and associates of my law firm.	sed compensation with any other person unless they are
	I have agreed to share the above-disclosed comembers or associates of my law firm. A copy of people sharing in the compensation, is attached.	compensation with a other person or persons who are not of the agreement, together with a list of the names of the
	In return for the above-disclosed fee, I have agreed to case, including:	o render legal service for all aspects of the bankruptcy
	a. Analysis of the debtor's financial situation, and file a petition in bankruptcy;	rendering advice to the debtor in determining whether to
	b. Preparation and filing of any petition, schedules,	, statements of affairs and plan which may be required;
	c. Representation of the debtor at the meeting of cr	reditors and confirmation hearing, and any adjourned

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 60 of 64

B2030 (Form)	2030)	(12/15)
---------------	-------	---------

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this pankruptcy proceeding.

Signature of Attorney

Law Offices of Martin J. O'Hearn

10047 South Western Avenue

Chicago, IL 60643

(773)238-4400

Atty Reg# 6185904

4/2008

7

. .

Law Offices of Martin J. O'Hearn

CHAPTER 7 – Individual Debtor Contract for Legal Services

Total Attorneys Fees \$1,400.00, will be paid as stated in paragraph 3 prior to filing of the Chapter 7 Bankruptcy.

I retain the Law Offices of Martin J. O'Hearn to prepare and file a Chapter 7 Bankruptcy Petition and to represent me in this matter. I understand and agree that:

- 1. The attorney fees stated above do not include representation in any: post-petition motion; dischargeability action; judicial lien avoidance; relief from stay action; any adversary proceedings; or any post filing legal services.
- 2. I shall attend a mandatory Meeting of Creditors approximately four weeks after my case is filed. If I have not received notice of the date of my Meeting of Creditors within 14 days after my case has been filed, I shall telephone the Law Offices of Martin J. O'Hearn to obtain the date for my Meeting of Creditors;
- 3. I agree to pay \$350.00 attorney fees on December 16, 2015, \$350.00 on January 16, 2016, \$350.00 on February 16, 2016 and once I paid those payments and the \$335.00 filing fee myP Chapter 7 Bankruptcy Proceeding will be filed. The balance of \$350.00 will be paid on March 16, 2016.
- 4. I agree that I will fully disclose all financial information to the Law Offices of Martin J. O'Hearn. I shall provide the Law Offices of Martin J. O'Hearn with a complete list of my creditors. I shall disclose all of my assets and debts to the Law Offices of Martin J. O'Hearn and understand that it is a federal crime to intentionally omit information from my bankruptcy petition;
- 5. If additional creditors need to be added to my petition after the case has been filed, there will be an additional charge to amend my petition. Additionally, attorney fees may be modified if substantial changes or additional facts are discovered with regard to my financial situation;
- 6. This bankruptcy will not eliminate liens on real property and/or secured property. This bankruptcy will not discharge: government insured student loans; tuition and fees owed to not-for-profit schools; support obligations; benefit overpayments; government fines (e.g., parking and traffic tickets); DUI charges; certain income taxes; debts owed due to fraud or intentional injuries; or, debts owed to creditors who successfully object to the discharge of their debt or to the entire discharge.
- 7. Creditors are not required to allow debtor(s) to reaffirm their debts;
- 8. I may discontinue the services of the Law Offices of Martin J. O'Hearn at any time and may then be entitled to a refund of unearned fees. In order to discharge the Law Offices of Martin J. O'Hearn, I must submit a written request to do so. Upon receipt of such request, the Law Offices of Martin J. O'Hearn will take

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 62 of 64

approximately 30 days to perform an accounting and a refund check will then be issued for any unearned fees.

- 9. I authorize the Law Offices of Martin J. O'Hearn to hire co-counsel or independent attorneys to work on my case and to divide fees with such attorneys on the basis of work and responsibility; and
- 10. I authorize the Law Offices of Martin J. O'Hearn to order and review my credit report.
- 11. I acknowledge that I have received a list of approved Debtor Education Providers to take my Post Filing Personal Financial Management Course and that it shall be my responsibility to take said course after I file my Chapter 7 Bankruptcy Proceeding.

I acknowledge that I have read and been orally advised of the terms of this agreement and that the undersigned attorney has explained to be the differences between filing a Chapter 7 Bankruptcy and a Chapter 13 Bankruptcy.

Debtor

11-12-15

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 63 of 64

Fill in this in	formation to identify	your case:	
Debtor 1	Veronica L. Holloway	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)
Case number (if known)			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:

List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
Creditor's Bayview Loan Servicing	☐ Surrender the property.	☐ No	
name: Bayview Edan Gerviening	Retain the property and redeem it.	Yes	
Description of property	Retain the property and enter into a Reaffirmation Agreement.		
securing debt: 4600 Flossmoor Road, Country Club Hills, IL 60478	Retain the property and [explain]:		
Creditor's Silverleaf Resorts/Club	Surrender the property.	□ No	
name: Silverteal (Cesorts/Oldb	Retain the property and redeem it.	Yes	
Description of property	Retain the property and enter into a Reaffirmation Agreement.		
securing debt: Time Share	☐ Retain the property and [explain]:	-	
Creditor's Nissan Motor Accept Corp	or Accept Corp. Surrender the property.	□ No	
name:	Retain the property and redeem it.	Yes	
Description of property	Retain the property and enter into a Reaffirmation Agreement.		
securing debt: 2012 Nissan Pathfinder	Retain the property and [explain]:	_	
Creditor's	☐ Surrender the property.	□ No	
name:	Retain the property and redeem it.	Yes	
Description of property	Retain the property and enter into a Reaffirmation Agreement.		
securing debt:	Retain the property and [explain]:		

12/15

Case 16-33739 Doc 1 Filed 10/21/16 Entered 10/21/16 17:59:24 Desc Main Document Page 64 of 64

t 2: Li	st Your	Unexpired	Personal Property Leases	The state of the s
the info	mation be	low Do not	list real estate leases. Unexpi	dule G: Executory Contracts and Unexpired Leases (Official Form 106G), red leases are leases that are still in effect; the lease period has not yet the trustee does not assume it. 11 U.S.C. § 365(p)(2).
			I property leases	Will the lease be assumed?
.essor's na	ame:			☐ No
Description	of leased			Yes
essor's n	ame:			□ No
				☐ Yes
Description property:	of leased			
.essor's n	ame:			□ No
Description property:	n of leased			☐ Yes
_essor's n	ame:			□ No
Description property:	n of leased			☐ Yes
Lessor's n	ame:			□ No
Descriptio property:	n of leased	I		☐ Yes
Lessor's r	ame:			☐ No ☐ Yes
Descriptio property:	n of leased	i		Yes
Lessor's r	iame:			□ No
Description property:	n of lease	t		☐ Yes
rt 3:	Sign Beld	ow.		
Inder pen	alty of per property th	rjury, i decla lat is subjec	re that I have indicated my into	ention about any property of my estate that secures a debt and any
: VXX	NILL	U	· /	ure of Debtor 2